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Insentor Search

Lucas 09/827,785

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L17 ANSWER 1 OF 1 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER: 1998:323156 HCAPLUS

129:19687 DOCUMENT NUMBER:

Acellular pertussis vaccine with diphtheria and TITLE:

tetanus toxoids

INVENTOR(S): Florent, Patrick; Stephenne, Jean;

Vandecasserie, Christian

PATENT ASSIGNEE(S): Smithkline Beecham Biologicals S. A., Belg.; Florent,

Patrick; Stephenne, Jean; Vandecasserie, Christian

APPLICATION NO.

SOURCE: PCT Int. Appl., 26 pp.

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

KIND DATE

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.

111.	LDIVI	110.		111		DILL			111		OIII I	011 11	•	01111			
WO.	9819	702			- <i>-</i> -		0514				 97-Е		 0	1997	1104		
"														CN,			DE
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	RW.													DK,		FT.	FR
	100.							-						CG,			
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ΑIJ	9853								ΑI	J 19	98-5	3196		1997	1104		
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	9411								E	P 19	97-9	5013	7	1997	1104		
	9411																
								FR,	GB,	GR,	IT,	LI,	LU,	NL,	SE,	MC,	PT
		-		FI		•	•	•	,	•			•		•	•	
CN	1236					1999	1124		Cl	N 19	97-1	9949	1	1997	1104		
BR	9712	917		-		1000	1000				^ 7	0017		1997	1104		
ΝZ	9712 3353 2001 2227	84		Α		2000	1027		N2	Z 19	97-3	3538	4	1997	1104		
JΡ	2001	5034	22	T	2	2001	0313		J]	P 19	98-5	2107	0	1997	1104		
ΑT	2227	73		E		2002	0915		A.	r 19	97-9	5013	7	1997	1104		
ΕP	1240	905		Α	1	2002	0918		E	P 20	02-7	5821		1997	1104		
	R:	AT,	BE,	CH,	DE,	DK,	ES,	FR,	GB,	GR,	ΙT,	LI,	LU,	NL,	SE,	MC,	PT,
		ΙE,	SI,	FI													
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	9709													1997			
TW	4719	71		В		2002	0111		T					1997			
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	9904					2000								1999			
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RIT'	Y APP	LN.	INFO	.:										1996			
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The invention provides a diphtheria, tetanus and pertussis vaccine comprising a low dose of each of diphtheria toxoid (D), tetanus toxoid (T), pertussis toxin (PT), filamentous hemagglutinin (FHA) and pertactin (69K). The vaccine maintains an ability to prevent pertussis while showing exceptionally low reactogenicity. Combination vaccines comprising addnl. antigens are also provided.

IC ICM A61K039-10 ICS A61K039-05; A61K039-08 63-6 (Pharmaceuticals) CC Section cross-reference(s): 15 vaccine pertussis diphtheria tetanus toxoid formulation STΙT Hepatitis (A, immunity to; acellular pertussis vaccine with diphtheria and tetanus toxoids) ΙT Hemagglutinins RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (FHA (filamentous hemagglutinin); acellular pertussis vaccine with diphtheria and tetanus toxoids) IT Pertussis Vaccines (acellular pertussis vaccine with diphtheria and tetanus toxoids) Immunostimulants ΙT (adjuvants; acellular pertussis vaccine with diphtheria and tetanus toxoids) Toxoids IT RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (diphtheria; acellular pertussis vaccine with diphtheria and tetanus toxoids) TT Antigens RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (hepatitis B surface; acellular pertussis vaccine with diphtheria and tetanus toxoids) IΤ Poliomyelitis (immunity to; acellular pertussis vaccine with diphtheria and tetanus toxoids) Agglutinins and Lectins IT RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (pertactins; acellular pertussis vaccine with diphtheria and tetanus toxoids) ΙT Antigens RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (pertussis; acellular pertussis vaccine with diphtheria and tetanus toxoids) ΙT Toxoids RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (tetanus; acellular pertussis vaccine with diphtheria and tetanus toxoids) 21645-51-2, Aluminum hydroxide, biological 7784-30-7, Aluminum phosphate TΤ RL: MOA (Modifier or additive use); PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses) (adjuvant; acellular pertussis vaccine with diphtheria and tetanus toxoids)

REFERENCE COUNT:

THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

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=> d que stat 122
              2 SEA FILE=REGISTRY ABB=ON "ALUMINUM PHOSPHATE"/CN
             1 SEA FILE=REGISTRY ABB=ON "ALUMINUM HYDROXIDE"/CN
L15
L16
             18 SEA FILE=HCAPLUS ABB=ON ?DIPHTHERIA? AND ?PERTUSSIS? AND
                ?TETANUS? AND (FHA? OR ?FILAMENT?(W)?HEMAGGLUT?) AND (?PERTACTI
                N? OR 69K)
        7 SEA FILE=HCAPLUS ABB=ON L16 AND ?HEPATITIS?
              1 SEA FILE=HCAPLUS ABB=ON L16 AND ?ANTIGEN? (3A) HBS?
L19
              3 SEA FILE=HCAPLUS ABB=ON L16 AND ?IMMUN?(3A)(HIB? OR ?POLIO?
L20
                OR ?HEPATITIS?(W)A)
              4 SEA FILE=HCAPLUS ABB=ON L16 AND (L14 OR ?ALUMINUM?(W)?PHOSPHAT
L21
                ? OR L15 OR ?ALUMINUM?(W)?HYDROXID?)
             18 SEA FILE=HCAPLUS ABB=ON L16 OR L18 OR L19 OR L20 OR L21
L22
=> d ibib abs hitrn 122 1-18
L22 ANSWER 1 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN
                         2003:341356 HCAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                         139:83492
                         DTPa-HBV-IPV/Hib vaccine (Infanrix hexa)
TITLE:
                         Curran, Monique P.; Goa, Karen L.
AUTHOR(S):
CORPORATE SOURCE:
                        Adis International Limited, Auckland, N. Z.
SOURCE:
                         Drugs (2003), 63(7), 673-682
                         CODEN: DRUGAY; ISSN: 0012-6667
PUBLISHER:
                         Adis International Ltd.
DOCUMENT TYPE:
                         Journal; General Review
                         English
LANGUAGE:
     A review. Primary vaccination of infants with diphtheria-
     tetanus-acellular pertussis-hepatitis B
     recombinant (adsorbed)-inactivated poliomyelitis-adsorbed conjugated
     Haemophilus Influenzae type b vaccine (DTPa-HBV-IPV/Hib; Infanrix hexa)
     provided high levels of seroprotection against diphtheria
     toxoid, tetanus toxoid, poliovirus 1, 2 and 3, pertussis
     antigens (pertussis toxoid, filamentous
     hemagglutinin and pertactin), hepatitis B
     virus surface antigen and H. influenzae polyribosyl-ribitol-phosphate
     (PRP) antigen. Most infants (97%) had anti-PRP levels .gtoreq. 0.15
     .mu.g/mL, after a booster dose at 18 mo. Primary vaccination with the
     DTPa-HBV-IPV/Hib vaccine produced a similar immune response to that with
     two different pentavalent plus monovalent vaccine combinations.
     Coadministration of DTPa-HBV-IPV/Hib vaccine and a heptavalent
     pneumonococcal conjugate vaccine resulted in a high level of
     seroprotection and was well tolerated. Primary or booster vaccination
     with DTPa-HBV-IPV/Hib vaccine was well tolerated. Commonly reported local
     adverse reactions included redness, pain and swelling. Systemic symptoms
     were usually mild to moderate, and included fussiness, fever, restlessness
     and sleepiness.
REFERENCE COUNT:
                         42
                               THERE ARE 42 CITED REFERENCES AVAILABLE FOR THIS
                               RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
L22 ANSWER 2 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN
ACCESSION NUMBER:
                         2003:300440 HCAPLUS
DOCUMENT NUMBER:
                         138:319681
TITLE:
                         Genetically-detoxified pertussis holotoxin
                         as proteinaceous adjuvant
                         Gajewczyk, Diane M.; Boux, Heather A.; Novak, Anton;
INVENTOR(S):
                         Klein, Michel H.
PATENT ASSIGNEE(S):
                         Can.
SOURCE:
                         U.S. Pat. Appl. Publ., 25 pp., Cont.-in-part of U.S.
                         Ser. No. 258,228.
```

CODEN: USXXCO

DOCUMENT TYPE:

Patent English

LANGUAGE:

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO. DATE	
US 2003072774	A1	20030417	US 1995-481878 19950607	
CA 2192454	AA	19951221	CA 1995-2192454 19950608	
EP 1149588	A1	20011031	EP 2001-201598 19950608	
R: AT, BE,	CH, DE	, DK, ES,	FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, I	E
EP 1149589	A1	20011031	EP 2001-201610 19950608	
R: AT, BE,	CH, DE	, DK, ES,	FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, I	Ε
ES 2179105	Т3	20030116	ES 1995-924122 19950608	
PRIORITY APPLN. INFO).:		US 1994-258228 A2 19940610	
•			EP 1995-924122 A3 19950608	

A modulated immune response to an antigen is achieved by coadministering AΒ the antigen and a genetically-detoxified pertussis holotoxin, particularly one retaining its immunogenicity, to a host. The modulated immune response enables immunogenic compns., including multivalent pediatric vaccines, such as DTP, to be provided which produce a modulated immune response in the absence of extrinsic adjuvants, such as alum. The adjuvanting effect achieved by the genetically-detoxified pertussis holotoxin enables at least the same level of a modulated immune response to a non-Bordetella antigen to be achieved as previously attained by alum, without the undesirable side effects thereof. Modifications are possible within the scope of the disclosed invention.

L22 ANSWER 3 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER:

2002:725623 HCAPLUS

DOCUMENT NUMBER:

137:215395

TITLE:

Differing protective effects of acellular pertussis vaccines in neonatal and young mice in a murine model of respiratory infection

AUTHOR(S):

Watanabe, Mineo; Komatsu, Eiji; Sato, Takaaki; Nagai,

Masaaki

CORPORATE SOURCE:

Division of Bacterial Vaccines, Research Center for

Biologicals, The Kitasato Institute, Kitamoto,

364-0026, Japan

SOURCE:

Journal of Health Science (2002), 48(4), 341-345

CODEN: JHSCFD; ISSN: 1344-9702

PUBLISHER:

Pharmaceutical Society of Japan

DOCUMENT TYPE:

Journal

LANGUAGE:

English

The protective effects on neonatal (3.5 wk old) and young mice (7 wk old) of eight pertussis vaccines prepd. from various components at various concns. were investigated in a murine model of respiratory infection (aerosol challenge model). Neonatal mice were more sensitive than young mice to infection by Bordetella pertussis after aerosol challenge. In young mice with all vaccines, there were significant differences between immunized mice and control mice. efficacy of vaccines was increased by the inclusion of addnl.

filamentous hemagglutinin (FHA),

pertussis toxin (PT), or pertactin (PRN) in the basic vaccine (FHA: PT: PRN, 7:2:1, wt./wt.). An elevated level of FHA strongly increased the efficacy of the vaccine in young mice. It was, however, more difficult to induce protection against B. pertussis in neonatal mice than in young mice, irresp. of the levels of the various components in the vaccines. Our data suggest that

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pertussis vaccines are less effective in neonatal mice than in young mice, as assessed by the aerosol challenge model.

L22 ANSWER 4 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER:

2002:121758 HCAPLUS

DOCUMENT NUMBER:

137:61726

TITLE:

Characteristics and potency of an acellular

pertussis vaccine composed of pertussis toxin, filamentous hemagglutinin, and pertactin

AUTHOR(S):

Sheu, Gwo-Chang; Wo, Yu-Yuan Peter; Yao, Shu-Man; Chou, Foong-Yuang; Hsu, Tung-Chien; Ju, Chi-Liang; Cheng, Yafen; Chang, Shu-Nien; Lu, Cheng-Hsiung

CORPORATE SOURCE:

Center for Disease Control, Department of Health,

Vaccine Development Center, Taipei, Taiwan

SOURCE:

Journal of Microbiology, Immunology and Infection

(2001), 34(4), 243-251

CODEN: JMIIFG

PUBLISHER:

Chinese Society of Microbiology

DOCUMENT TYPE:

Journal English

LANGUAGE:

In an attempt to develop a safer pertussis vaccine, we successfully purified 3 pertussis protective antigens-

pertussis toxin, filamentous hemagglutinin,

and a 69-kDa outer membrane protein (also named pertactin), from

Bordetella pertussis strain ATCC 9340. The toxicity of

pertussis toxin could be effectively reduced by the treatment with formaldehyde 0.07% while preserving of a high degree of immunogenicity.

By mixing purified pertussis antigens with diphtheria

and tetanus toxoids (DT), we have formulated a DT acellular pertussis (DTaP) vaccine. Toxicity studies on body-wt. gain in mouse, histamine sensitization, lymphocyte promoting, and Chinese hamster

ovary cell clustering tests suggested that this DTaP vaccine is safer than a whole cell vaccine produced in France (DTP[F]). The formulated vaccine elicited high levels of anti-pertussis toxin antibodies in both mice and monkeys. In mice, a 2-fold neutralization of anti-

pertussis toxin antibodies was produced by DTaP compared with DTP(F) vaccine and an acellular vaccine manufd. in Japan (DTaP[J]). More

importantly, in intracerebral challenge assay in mouse, this vaccine also provided a better protection than DTaP(J).

REFERENCE COUNT:

48 THERE ARE 48 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 5 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER:

2001:247205 HCAPLUS

DOCUMENT NUMBER:

SOURCE:

134:256900

TITLE:

Mucosal DTPa vaccines

INVENTOR(S):

Rappuoli, Rino; Pizza, Mariagrazia

PATENT ASSIGNEE(S):

Chiron S.p.A., Italy PCT Int. Appl., 29 pp.

CODEN: PIXXD2

DOCUMENT TYPE:

Patent English

LANGUAGE:

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001022993	A2	20010405	WO 2000-IB1440	20000928
WO 2001022993	Z 3	20011025		

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W: CA, JP, US
        RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL,
             PT, SE
                            20020724
                                           EP 2000-962770
    EP 1223975
                      Α2
                                                            20000928
            AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
             IE, FI, CY
     JP 2003510292
                            20030318
                                           JP 2001-526202
                      T2
                                                            20000928
PRIORITY APPLN. INFO.:
                                        GB 1999-23060
                                                        A 19990929
                                        WO 2000-IB1440
                                                         W 20000928
    Mucosal DTPa vaccines, esp. intranasal vaccines, comprising (a) a
    diphtheria antigen, a tetanus antigen and an acellular
    pertussis antigen, and (b) a detoxified mutant of cholera toxin
     (CT) or E.coli heat labile toxin (LT). Component (b) acts as a mucosal
     adjuvant. The acellular pertussis antigen preferably comprises
    pertussis holotoxin (PT) and filamentous
    hemagglutinin (FHA) and, optionally, pertactin
       The mucosally-delivered combined DTPa formulation is capable of
    generating a level of protection against B. pertussis infection
    equiv. to that obsd. by alum-adjuvanted parenteral administration. A DTPa
    vaccine adjuvanted with alum (300 .mu.g/dose, 300 .mu.L vol.) for i.m.
    administration, for direct comparison with LT-K63-adjuvanted intranasal
    vaccine(10 .mu.g adjuvant/dose 40 .mu.L vol.). The Pa component of the
    vaccine included 5 .mu.g rPT, 2.5 .mu.g FHA, and 2.5 .mu.g
    pertactin; the T component was 10 .mu.g tetanus toxoid;
    the D component was 10 .mu.g CRM197. The intranasal vaccine enhanced
     cellular and humoral immune responses to tetanus and
    diphtheria as well as pertussis antigens. The levels of
     serum IqG using the intranasal vaccine were equiv. to those obsd. using
    the i.m. vaccine, but the mucosal immunization advantageously enhance
    local IgA responses. The protective efficacy of LT-K63-adjuvanted vaccine
    matched that of the std. alum-adjuvanted vaccine, although clearance
    kinetics varied slightly.
L22 ANSWER 6 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN
ACCESSION NUMBER:
                         2000:420981 HCAPLUS
DOCUMENT NUMBER:
                         133:57570
TITLE:
                        Multi-component vaccine comprising at least two
                         antigens from Haemophilus influenzae to protect
                         against disease
INVENTOR(S):
                         Loosmore, Sheena M.; Yang, Yan-ping; Klein, Michel H.
PATENT ASSIGNEE(S):
                         Connaught Laboratories Ltd., Can.
SOURCE:
                         PCT Int. Appl., 44 pp.
                         CODEN: PIXXD2
DOCUMENT TYPE:
                         Patent
LANGUAGE:
                         English
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
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PAT	ENT 1	۷O.		KII	ND	DATE			A1	PPLI	CATI	ON NO	o. 	DATE			
	20000 20000			A: A:	-	2000 2000			W	199	99-C	A1189	9	1999:	1215		
		CZ, IN, MD, SK, AZ,	DE, IS, MG, SL, BY,	DK, JP, MK, TJ, KG,	DM, KE, MN, TM, KZ,	EE, KG, MW, TR, MD,	ES, KP, MX, TT, RU,	FI, KR, NO, TZ, TJ,	GB, KZ, NZ, UA, TM	GD, LC, PL, UG,	GE, LK, PT, US,	GH, LR, RO, UZ,	GM, LS, RU, VN,	CH, HR, LT, SD, YU,	HU, LU, SE, ZA,	ID, LV, SG, ZW,	IL, MA, SI, AM,
	RW:													BE, SE,			

CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG CA 2355466 20000622 CA 1999-2355466 19991215 AA

EP 1140158 Α2 20011010 EP 1999-957822 19991215

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,

IE, SI, LT, LV, FI, RO

20021002 JP 2000-587796 19991215 JP 2002532433 T2 PRIORITY APPLN. INFO.: US 1998-210995 Α 19981215 WO 1999-CA1189 W 19991215

AΒ A multi-component immunogenic compn. confers protection on an immunized host against infection caused by Haemophilus influenzae . Such compn. comprises at least two different antigens of Haemophilus influenzae , one of which is an adhesin. High mol. wt. (HMW) proteins of non-typeable Haemophilus influenzae enhance the immune response in a host to a non-proteolytic analog of Hin47 protein in such immunogenic compns. with one component not impairing the immunogenicity of the other. Haemophilus vaccine may be combined with DTP component vaccines to provide a multi-valent component vaccine without impairment of the immunogenic properties of the other antigens.

7784-30-7, Aluminum phosphate TΤ

21645-51-2, Aluminum hydroxide, biological

studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (multi-component vaccine comprising at least two antigens from Haemophilus influenzae to protect against disease)

L22 ANSWER 7 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

2000:308998 HCAPLUS ACCESSION NUMBER:

DOCUMENT NUMBER:

133:333683

TITLE:

A randomized controlled trial with a

diphtheria-tetanus-acellular

pertussis (dTpa) vaccine in adults AUTHOR(S):

Van der Wielen, M.; Van Damme, P.; Joossens, E.;

Francois, G.; Meurice, F.; Ramalho, A.

Centre for the Evaluation of Vaccination, Epidemiology CORPORATE SOURCE:

and Community Medicine, University of Antwerp,

Antwerp, Belg.

SOURCE:

Vaccine (2000), 18(20), 2075-2082 CODEN: VACCDE; ISSN: 0264-410X

PUBLISHER:

LANGUAGE:

Elsevier Science Ltd.

DOCUMENT TYPE:

Journal English

The aim of this assessor-blinded trial was to compare the immunogenicity AB and reactogenicity of a candidate diphtheria, tetanus toxoids and acellular pertussis vaccine with reduced antigen content for diphtheria and pertussis (dTpa) with a licensed reduced adult-type diphtheria-tetanus vaccine Id (reduced diphtheria content) and with an exptl. candidate monovalent acellular pertussis vaccine with reduced antigen content (pa). The dTpa and pa vaccines had identical pertussis antigen content. A total of 299 healthy adults (.gtoreq.18 yr, mean age: 30.1 yr .+-. 10.7) were randomized into 3 groups to receive a single dose of one of the study vaccines. In all groups, clin. significant reactions (severe) were infrequent (0-6%) and no serious adverse events were reported during the study. The incidence of local and systemic reactions following the administration of dTpa was comparable to the Td vaccine group. Of the total study group, prior to vaccination 52.3 and 93.2% of the subjects had antidiphtheria and anti-tetanus antibody levels .gtoreq.0.1 IU/mL, resp.; and 73.1, 98.2 and 74.5% of the subjects were seropos. for pertussis toxin (PT),

filamentous hemagglutinin (FHA) and

pertactin (PRN) antibodies, resp. One month after vaccination, a similar percentage of subjects in the dTpa and Td groups and antidiphtheria (88.4% vs 90.1%) and anti-tetanus (100% vs 98.9%) antibody levels .gtoreq.0.1 IU/mL. Similar anti-FHA (100%) and anti-PRN (98.9%) vaccine response rates were seen in the dTpa and pa groups, while the anti-PT vaccine response rates were 96.8 and 100.0%, resp. The dTpa vaccine is as well tolerated and immunogenic as the licensed Td vaccine, and addnl., can also boost antibodies against pertussis.

REFERENCE COUNT:

49 THERE ARE 49 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 8 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER: 1999:792801 HCAPLUS

DOCUMENT NUMBER: 132:333079

TITLE: DTaP vaccines from North American Vaccine (NAVA):

composition and critical parameters

AUTHOR(S): Heron, Iver; Chen, F. M.; Fusco, Joan

CORPORATE SOURCE: North American Vaccine Inc., Columbia, MD, USA

SOURCE: Biologicals (1999), 27(2), 91-96 CODEN: BILSEC; ISSN: 1045-1056

PUBLISHER: Academic Press

DOCUMENT TYPE: Journal LANGUAGE: English

NAVA's acellular pertussis vaccine is based on highly purified pertussis toxin (PT) inactivated with H2O2. PT was analyzed using advanced biochem. methodol. including mass spectroscopy (LC/MS), yielding mass and peptide mapping information on the subunits. Pertactin, adenylate cyclase, and Fim 1, 2 were below detection levels and only trace amts. of filamentous hemagglutinin (FHA) have been identified as a minor impurity. The vaccine does not induce

anti-FHA antibodies during the course of a 3-dose primary immunization series in infants. B and T cell epitopes are preserved to a higher extent after H2O2 detoxification when compared with chem. inactivation with formaldehyde, thus providing new information explaining

why vaccines employing formaldehyde detoxified PT may need addnl.

pertussis components added to induce high levels of protection.

Anti-PT antibodies generated by NAVA diphtheria, tetanus, and acellular pertussis vaccine (DTaP) showed a pos.

correlation with protection against WHO-defined **pertussis**. The safety profiles for these vaccines showed low reactogenicity with no serious adverse events due to the vaccines. (c) 1999 The International Association of Biological Standardization.

REFERENCE COUNT: 11 THERE ARE 11 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 9 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER: 1998:704686 HCAPLUS

DOCUMENT NUMBER: 130:108839

TITLE: A combined liquid Hib (PRP-OMP), hepatitis

B, diphtheria, tetanus and

whole-cell pertussis vaccine: uncontrolled preliminary clinical trial of immunogenicity and

reactogenicity

AUTHOR(S): Nolan, Terry; Hogg, Geoff; Darcy, Mary-Ann; Skeljo,

Maryanne; Carlin, John

CORPORATE SOURCE: Clinical Epidemiology and Biostatistics Unit,

Melbourne University Department of Paediatrics, at the

Royal Children's Hospital, Melbourne, Australia

SOURCE: Vaccine (1998), 16(20), 2085-2089

CODEN: VACCDE; ISSN: 0264-410X

PUBLISHER:

Elsevier Science Ltd.

DOCUMENT TYPE: LANGUAGE:

Journal English

The authors have conducted a preliminary uncontrolled clin. trial of the immunogenicity and reactogenicity of a new fully liq. pentavalent

combination vaccination which incorporates a diphtheria,

tetanus and whole-cell pertussis vaccine with Hib

(PRP-OMP) and hepatitis B vaccines. Forty-five infants received three doses of the pentavalent vaccination at 2, 4, and 6 mo of age, and then a fourth dose at 18 mo of age. Subjects were bled prior to each vaccination, and a month after the third and fourth vaccinations. A 7-day diary card was used to record subject temps. and other systemic and local clin. signs after each vaccination. After the third dose, 98% of subjects had anti-PRP titers above 1 .mu.g mL-1 (95%ci 88%, 100%). Following boosting, the geometric mean titer (GMT) rose a mean 27-fold (95%ci 19-fold, 38-fold) to 33 .mu.g mL-1, and all subjects' titers (lower bound of 95%ci 92%) exceeded 1 .mu.g mL-1. For hepatitis B antibody, there was a GMT of 100 mIU mL-1 after the third dose, and 86% of infants (95%ci 73%, 95%) had antibody levels .gtoreq. 10 mIU mL-1. After the fourth dose, there was a mean 77-fold boost (95%ci 48-fold, 130-fold) to a GMT of 860 mIU mL-1 and 95% (95%ci 84%, 99%) of subjects had titers .gtoreq. 10 mIU mL-1. Diphtheria, tetanus, and

pertussis antibody levels were all at acceptable levels after the first three doses and again after the fourth vaccination. The pentavalent vaccine was well tolerated at all administration times, and had a minor reactogenicity profile similar to DTPw alone as reported in previous studies. This study has provided preliminary evidence for both the safety and immunogenicity of the pentavalent vaccine given as a course at 2, 4, 6 and 18 mo.

REFERENCE COUNT:

15 THERE ARE 15 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 10 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER:

1998:563409 HCAPLUS

DOCUMENT NUMBER:

129:314703

TITLE:

The preterm infant's antibody response to a combined

diphtheria, tetanus, acellular pertussis and hepatitis B vaccine

AUTHOR(S):

Faldella, Giacomo; Alessandroni, Rosina; Magini,

Giulia Massinissa; Perrone, Annamaria; Sabatini, Maria

Rita; Vancini, Alessandra; Salvioli, Gian Paolo

CORPORATE SOURCE:

Preventive Paediatrics and Neonatology, University of

Bologna, Bologna, 40138, Italy Vaccine (1998), 16(17), 1646-1649

CODEN: VACCDE; ISSN: 0264-410X

PUBLISHER:

SOURCE:

Elsevier Science Ltd.

DOCUMENT TYPE:

Journal

LANGUAGE:

English

Several combined vaccines have recently been developed, in order to improve the implementation of immunization programs and increase the coverage for each vaccine. As the response of preterm infants may vary depending on the vaccination schedule and the vaccine product, it should be evaluated specifically as new vaccines become available. In this study we have examd. the antibody response to a combined diphtheria, tetanus, acellular pertussis, and hepatitis B vaccine (DTPa-HBV), given as a primary vaccination course at 3, 5 and 11 mo of postnatal age, in 34 preterm infants (mean gestational age (GA) = 32.0 wk) in comparison with 28 term infants. At the end of the primary course, preterm infants had antibody concns. for pertussis 69

kDa antigen and diphtheria toxoid that were significantly lower than those of term infants; preterm infants with GA .ltoreq. 31 wk had antibody concns. for pertussis 69 kDa antigen and HBsAg that were significantly lower than those of preterm infants with higher GA; anti-HBs antibody levels correlated with GA. However, the combined DTPa-HBV vaccine elicited seroconversion to all its components in all but two infants, one term and one preterm, after the second dose and a total seroconversion after the third dose. We conclude that preterm infants may be immunized with a combined DTPa-HBV vaccine, starting at the same chronol. age, as term infants.

REFERENCE COUNT:

THERE ARE 17 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 11 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

17

1998:563398 HCAPLUS ACCESSION NUMBER:

129:314698 DOCUMENT NUMBER:

Antibody and cell-mediated immune responses to booster TITLE:

immunization with a new acellular pertussis

vaccine in school children

Minh, N. N. Tran; Edelman, K.; He, Q.; Viljanen, M. AUTHOR(S):

K.; Arvilommi, H.; Mertsola, J. .

Department in Turku, National Public Health Institute, CORPORATE SOURCE:

Turku, FIN-20520, Finland

Vaccine (1998), 16(17), 1604-1610 CODEN: VACCDE; ISSN: 0264-410X SOURCE:

Elsevier Science Ltd. PUBLISHER:

Journal DOCUMENT TYPE: English LANGUAGE:

School children, 235 healthy 10-12 yr olds, were randomly immunized with

either a booster dose of diphtheria-tetanus-acellular

pertussis (dTap) or diphtheria-tetanus (dT)

vaccine. For this booster immunization designed for school children and adults, the quantities of Bordetella pertussis antigens in the dTap vaccine had been reduced to one third of those of the Infanrix vaccine (SmithKline Beecham) commonly used for infants. IgG antibodies and cell-mediated immune (CMI) responses to pertussis toxin

(PT), pertactin (PRN) and filamentous

hemagglutinin (FHA) were assessed by an enzyme immunosorbent assay and in vitro proliferation of peripheral blood mononuclear cells, resp. Before immunization, 55%, 80% and 99% of children had detectable serum IgG antibodies to PT, PRN and FHA, whereas CMI response was found in 35%, 27% and 50% of children, resp. After immunization, a 20-30-fold increase in geometric mean level (GML) of antibodies to the pertussis antigens occurred and CMI response to PT, PRN and FHA was seen in 88%, 94% and 100% of children, resp. Adverse reactions following the immunization were rare. The results show that booster immunization with an acellular pertussis vaccine with reduced concns. of antigens induces both antibody and CMI responses and support further studies of this pertussis vaccine in school children.

REFERENCE COUNT:

THERE ARE 22 CITED REFERENCES AVAILABLE FOR THIS 22 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 12 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

1998:323156 HCAPLUS ACCESSION NUMBER:

129:19687 DOCUMENT NUMBER:

Acellular pertussis vaccine with TITLE: diphtheria and tetanus toxoids

Florent, Patrick; Stephenne, Jean; Vandecasserie, INVENTOR(S):

Christian

PATENT ASSIGNEE(S):

Smithkline Beecham Biologicals S. A., Belg.; Florent, Patrick; Stephenne, Jean; Vandecasserie, Christian

PCT Int. Appl., 26 pp.

SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

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          PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
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                                                   AU 1998-53196
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                           В1
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     EP 941117
              AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
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                                 19991124
                                                   CN 1997-199491
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     CN 1236321
                           Α
                                 19991207
                                                   BR 1997-12917
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               IE, SI, FI
                                                   ES 1997-950137
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     ES 2182131
                           Т3
                                                   ZA 1997-9984
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                                                                   A 19961107
PRIORITY APPLN. INFO.:
                                                                   A3 19971104
                                               EP 1997-950137
                                                                    W 19971104
                                               WO 1997-EP6180
                                                                    B1 19990527
                                               US 1999-284887
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AB The invention provides a diphtheria, tetanus and pertussis vaccine comprising a low dose of each of diphtheria toxoid (D), tetanus toxoid (T), pertussis toxin (PT), filamentous hemagglutinin (FHA) and pertactin (69K). The vaccine maintains an ability to prevent pertussis while showing exceptionally low reactogenicity. Combination vaccines comprising addnl. antigens are also provided.

IT 7784-30-7, Aluminum phosphate
21645-51-2, Aluminum hydroxide, biological

studies

RL: MOA (Modifier or additive use); PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(adjuvant; acellular pertussis vaccine with

diphtheria and tetanus toxoids)

THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS 4 REFERENCE COUNT: RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L22 ANSWER 13 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

ACCESSION NUMBER:

1998:55553 HCAPLUS

DOCUMENT NUMBER:

128:127079

TITLE:

Multivalent DTP-polio vaccines

INVENTOR(S):

Fahim, Raafat E. F.; Tan, Larry U. L.; Barreto, Luis;

Thipphawong, John; Jackson, Gail E. D.

PATENT ASSIGNEE(S):

Connaught Laboratories Ltd., Can.; Fahim, Raafat E. F.; Tan, Larry U. L.; Barreto, Luis; Thipphawong,

John; Jackson, Gail E. D. PCT Int. Appl., 117 pp.

SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PA'	rent 1	NO.		KI	ND	DATE			A.		CATI		ο.	DATE			
MO.	9800	167		Δ.	- - 1	1998	0108		W					1997	0702		
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		LC.	LK.	LR.	LS.	LT.	LU.	LV.	MD.	MG.	MK.	MN,	MW,	MX,	NO,	NZ,	PL,
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						KG,						•	•	•			
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CA	2259	415		A	A	1998	0108		C	A 19	97-2	2594	15	1997	0702		
ΑIJ	9732	516		A	1	1998	0121		A	U 19	97-3	2516		1997	0702		
ΑU	7144	93		B	2.	2000	0106										
ΕP	9141	53		A	1	1999	0512		Ε	P 19	97-9	2808	9	1997	0702		
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		ΙE,															
BR	9710	460		A		1999	0817		B.	R 19	97-1	0460					
	1228					1999	0915				97-1		-	1997			
JP	2000	5040	32 .	\mathbf{T}	2	2000	0404		J	P 19	98-5	0369	0	1997	0702		
	3280			B.		2002											
NZ	3339	89		Α		2000	0623		N	Z 19	97-3	3398	9	1997	0702		
JP	2002																
RU	2194	531		C:	2	2002	1220				99-1		-	1997			
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- A multi-component vaccine compn. is described comprising acellular AΒ pertussis vaccine components, diphtheria toxoid, tetanus toxoid, and inactivated poliovirus. The compn. also may contain a conjugate of a capsular polysaccharide of Haemophilus influenzae type b and tetanus toxoid or diphteria toxoid, which may be reconstituted from a lyophilized state by the other components of the vaccine. The administration of the multiple component vaccine results in no diminution in the immunogenicity of any component as a result of interference by other components of the vaccine.
- IT 7784-30-7, Aluminum phosphate

21645-51-2, Aluminum hydroxide, biological

RL: BAC (Biological activity or effector, except adverse); BSU (Biological

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study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES
     (Uses)
        (prepn., immunogenicity, safety, and clin. effects of multivalent
        vaccines against pertussis, diphtheria,
        tetanus, poliomyelitis, and Haemophilus influenzae infection in
        children in relation to)
                               THERE ARE 8 CITED REFERENCES AVAILABLE FOR THIS
REFERENCE COUNT:
                         8
                               RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
L22 ANSWER 14 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN
                         1998:1387 HCAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                         128:74301
                         Monovalent pertussis vaccine and multivalent
TITLE:
                         vaccines against hepatitis and Hib using
                         pertactin
                         Slaoui, Moncef Mohamed; Stephenne, Jean
INVENTOR(S):
                         Smithkline Beecham Biologicals S.A., Belg.; Slaoui,
PATENT ASSIGNEE(S):
                         Moncef Mohamed; Stephenne, Jean
                         PCT Int. Appl., 19 pp.
SOURCE:
                         CODEN: PIXXD2
                         Patent
DOCUMENT TYPE:
                         English
LANGUAGE:
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
     PATENT NO.
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     WO 9746255
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     WO 9746255
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     JP 2000511553
                       T2
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                                           JP 1998-500238
                                                            19970529
PRIORITY APPLN. INFO.:
                                        GB 1996-11501 A 19960603
                                        WO 1997-EP2956 W 19970529
     Vaccine compns. comprising the 69K outer membrane protein of B.
AB
     pertussis (pertactin) having 10-100 .mu.g of 69K
     per 0.5 mL dose are described for the treatment of whooping cough.
     described are combination vaccines comprising 10-100 .mu.g of 69K
     per 0.5 mL, esp. vaccines in which the 69K component is
     formulated with filamentous hemagglutinin (FHA
     ) and pertussis toxoid (PT), optionally in combination with one
     or more other antigens such as hepatitis B surface antigen,
     Haemophilus influenzae b (Hib), injectable polio (IPV) and
     hepatitis A. Methods for prepg. the vaccines are described.
     7784-30-7, Aluminum phosphate
TT
     21645-51-2, Aluminum hydroxide, uses
    RL: MOA (Modifier or additive use); USES (Uses)
        (monovalent pertussis vaccine and multivalent vaccines
        against hepatitis and Haemophilus influenza type b using
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pertactin)

L22 ANSWER 15 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

1997:351280 HCAPLUS ACCESSION NUMBER:

127:79909 DOCUMENT NUMBER:

TITLE: Vaccine- and antigen-dependent type 1 and type 2

cytokine induction after primary vaccination of infants with whole-cell or acellular pertussis

vaccines

AUTHOR(S): Ausiello, Clara M.; Urbani, Francesca; La Sala,

Andrea; Lande, Roberto; Cassone, Antonio

CORPORATE SOURCE: Department Bacteriology Medical Mycology, Istituto

Superiore Sanita, Rome, 00161, Italy

Infection and Immunity (1997), 65(6), 2168-2174 SOURCE:

CODEN: INFIBR; ISSN: 0019-9567 American Society for Microbiology

PUBLISHER: DOCUMENT TYPE: Journal

LANGUAGE: English

Cytokine profiles were examd. 1 mo after primary vaccination of infants AΒ with a whole-cell pertussis vaccine (wP) (Connaught) or either of 2 acellular pertussis vaccines, aP-Chiron Biocine (aP-CB) or aP-SmithKline Beecham (aP-SB), each combined with diphtheriatetanus toxoids (DT), in Bordetella pertussis antigen-stimulated or unstimulated peripheral blood mononuclear cells (PBMC). Pertussis toxin (PT), filamentous

hemagglutinin (FHA), and pertactin (PRN) were used as antigens, and the children were defined as responsive when their PBMC proliferated in response to these antigens. The controls were either children who received only DT or children who received pertussis vaccine but whose PBMC did not proliferate upon stimulation with B. pertussis antigens (unresponsive children). Antigen-stimulated PBMC of responsive wP recipients were characterized by an elevated prodn. of T-helper-cell type 1 cytokines .gamma. interferon (IFN-.gamma.) and interleukin 2 (IL-2), low to minimal prodn. of IL-5, and no prodn. of IL-4. The PBMC of aP vaccine-responsive recipients showed, in addn. to the elevated IFN-.gamma. prodn., a consistent, antigen-dependent prodn. of type 2 cytokines (IL-4 and IL-5), with PRN being the most and PT being the least effective antigen. Type 2 cytokine induction was more pronounced in aP-SB than in aP-CB recipients, as shown by the presence of IL-4 mRNA transcripts and higher IL-5 prodn. in the former (161.6 and 47.9 pg/mL, resp., after PRN stimulation). Appreciable, antigen-unstimulated (constitutive) IFN-.gamma. prodn. was also detected in PBMC cultures of all vaccinees. However, this spontaneous IFN-.gamma. prodn. was, in most vaccines, lower than the antigen-driven cytokine prodn. In contrast, no constitutive type 2 cytokine prodn. was ever obsd. in any vaccine group. PBMC from the 2 control groups (either DT or pertussis vaccine recipients) did not show any type 2 cytokine prodn., while IFN-.gamma. prodn. was comparable in both antigen-stimulated and unstimulated conditions. Absence of type 2 cytokines and low levels of constitutive IFN-.gamma. prodn. were also seen in prevaccination children. Thus, pertussis vaccines induce in infants a basically type 1 cytokine profile, which is, however, accompanied by some prodn. of type 2 cytokines. The latter are more expressed by aP-SB than by aP-CB recipients, and with PRN than with other antigens, and they are minimally expressed in wP recipients and with PT as antigen. The authors' data also highlight a constitutive IFN-.gamma. prodn. in infancy, which might reflect natural immunization and/or the burden of concomitant vaccinations

L22 ANSWER 16 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN 1996:761878 HCAPLUS ACCESSION NUMBER:

polarization consequent to pertussis vaccination.

and which may have an impact on T-helper cell cytokine pattern

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DOCUMENT NUMBER: 126:37038
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TITLE: Acellular pertussis vaccines and methods of

preparation thereof

INVENTOR(S): Vose, John R.; Fahim, Raafat E. F.; Jackson, Gail E.

D.; Tan, Larry U. L.; Herbert, Andrew; Boux, Leslie; Barreto, Luis; Thipphawong, John; Klein, Michel H.

PATENT ASSIGNEE(S): Connaught Laboratories Limited, Can.; Vose, John R.;

Fahim, Raafat E. F.; Jackson, Gail E. D.; Tan, Larry U. L.; Herbert, Andrew; Boux, Leslie; Barreto, Luis;

Thipphawong, John; Klein, Michel H.

SOURCE: PCT Int. Appl., 62 pp.

CODEN: PIXXD2

DOCUMENT TYPE:

Patent English

LANGUAGE: Er FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

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                      B2
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                                                       A 19950504
PRIORITY APPLN. INFO .:
                                       US 1995-433646
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                                       US 1995-501743
                                                       A3 19960502
                                       EP 1996-911886
                                       EP 1996-911887
                                                       A3 19960502
                                       WO 1996-CA278
                                                       W 19960502
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AB Acellular pertussis vaccines comprise purified toxin or toxoid thereof, filamentous hemagglutinin, pertactin and fimbrial agglutinogens formulated to confer protection to at least 70% of members of an at-risk population. The fimbrial agglutinogens may be prepd. from a Bordetella strain, particularly a B. pertussis strain, by a multiple step procedure involving extn. of the fimbrial

agglutinogens from cell paste and concq. and purifying the extd. material.

L22 ANSWER 17 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

1996:71413 HCAPLUS ACCESSION NUMBER:

124:115448 DOCUMENT NUMBER:

Genetically-detoxified pertussis holotoxin TITLE:

as adjuvants

Gajewczyk, Diane M.; Boux, Heather A.; Novak, Anton; INVENTOR(S):

Klein, Michel H.

Connaught Laboratories Ltd., Can. PATENT ASSIGNEE(S):

PCT Int. Appl., 59 pp. SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE: Patent LANGUAGE: English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

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INFO::	9534323 A2 1995 9534323 A3 1996 W: AM, AT, AU, BB, BG, GB, GE, HU, JP, KE, MN, MW, MX, NO, NZ, US, UZ RW: KE, MW, SD, SZ, UG, LU, MC, NL, PT, SE, SN, TD, TG 2192454 AA 1995 764029 A1 1997 764029 B1 2002 R: AT, BE, CH, DE, DK, 1149588 A1 2001 R: AT, BE, CH, DE, DK, 1149589 A1 2001 R: AT, BE, CH, DE, DK, 1149589 A1 2001 R: AT, BE, CH, DE, DK, 219686 E 2002 Y APPLN. INFO.:	9534323 A2 19951221 9534323 A3 19960118 W: AM, AT, AU, BB, BG, BR, GB, GE, HU, JP, KE, KG, MN, MW, MX, NO, NZ, PL, US, UZ RW: KE, MW, SD, SZ, UG, AT, LU, MC, NL, PT, SE, BF, SN, TD, TG 2192454 AA 19951221 9528765 A1 19960105 764029 A1 19970326 R: AT, BE, CH, DE, DK, ES, 1149588 A1 20011031 R: AT, BE, CH, DE, DK, ES, 1149589 A1 20011031 R: AT, BE, CH, DE, DK, ES, 219686 E 20020715 2179105 T3 20030116 Y APPLN. 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INFO.:	9534323 A2 19951221 W0 9534323 A3 19960118 W: AM, AT, AU, BB, BG, BR, BY, CA, GB, GE, HU, JP, KE, KG, KP, KR, MN, MW, MX, NO, NZ, PL, PT, RO, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, LU, MC, NL, PT, SE, BF, BJ, CF, SN, TD, TG 2192454 AA 19951221 C2 9528765 A1 19960105 A1 9528765 A1 19970326 E2 764029 B1 20020626 R: AT, BE, CH, DE, DK, ES, FR, GB, 1149588 A1 20011031 E2 R: AT, BE, CH, DE, DK, ES, FR, GB, 1149589 A1 20011031 E2 R: AT, BE, CH, DE, DK, ES, FR, GB, 219686 E 20020715 A2 2179105 T3 20030116 E3	9534323 A2 19951221 WO 19 9534323 A3 19960118 W: AM, AT, AU, BB, BG, BR, BY, CA, CH, GB, GE, HU, JP, KE, KG, KP, KR, KZ, MN, MW, MX, NO, NZ, PL, PT, RO, RU, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, LU, MC, NL, PT, SE, BF, BJ, CF, CG, SN, TD, TG 2192454 AA 19951221 CA 19 9528765 A1 19960105 AU 19 764029 A1 19970326 EP 19 764029 B1 20020626 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149588 A1 20011031 EP 20 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149589 A1 20011031 EP 20 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149589 A1 20011031 EP 20 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149589 A1 20011031 EP 20 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149580 A1 20011031 EP 20 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149580 A1 20011031 EP 20 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, 1149580 E 20020715 AT 19 2179105 T3 20030116 ES 19 Y APPLN. INFO:: US 1994-EP 1995-WO 1995-	9534323 A2 19951221 W0 1995-C. 9534323 A3 19960118 W: AM, AT, AU, BB, BG, BR, BY, CA, CH, CN, GB, GE, HU, JP, KE, KG, KP, KR, KZ, LK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, SN, TD, TG 2192454 AA 19951221 CA 1995-2 9528765 A1 19960105 AU 1995-2 764029 A1 19970326 EP 1995-9 764029 B1 20020626 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, 1149588 A1 20011031 EP 2001-2 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, 1149589 A1 20011031 EP 2001-2 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, 219686 E 20020715 AT 1995-9 2179105 T3 20030116 ES 1995-9 Y APPLN. INFO: US 1994-2582 EP 1995-9241 W0 1995-CA34	9534323	9534323	9534323 A2 19951221 WO 1995-CA341 1995 9534323 A3 19960118 W: AM, AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, GB, GE, HU, JP, KE, KG, KP, KR, KZ, LK, LR, LT, LU, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SI, SK, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, SN, TD, TG 2192454 AA 19951221 CA 1995-2192454 1995 764029 A1 19970326 EP 1995-924122 1995 764029 B1 20020626 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, 1149588 A1 20011031 EP 2001-201598 1995 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, 1149589 A1 20011031 EP 2001-201610 1995 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, 1149580 E 20020715 AT 1995-924122 1995 Y APPLN. INFO: US 1994-258228 A 1994 EP 1995-924122 1995 Y APPLN. INFO: US 1995-924122 A3 1995 WO 1995-CA341 W 1995	W: AM, AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE, GB, GE, HU, JP, KE, KG, KP, KR, KZ, LK, LR, LT, LU, LV, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SI, SK, TJ, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, SN, TD, TG 2192454 AA 19951221 CA 1995-2192454 19950608 764029 A1 19970326 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, MC, 1149588 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, 1149589 A1 20011031 EP 2001-201610 19950608	9534323 A2 19951221 WO 1995-CA341 19950608 W: AM, AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE, ES, GB, GE, HU, JP, KE, KG, KP, KR, KZ, LK, LR, LT, LU, LV, MD, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SI, SK, TJ, TT, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, SN, TD, TG 2192454 AA 19951221 CA 1995-2192454 19950608 764029 A1 19960105 AU 1995-28765 19950608 764029 B1 20020626 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, MC, NL, 1149588 A1 20011031 EP 2001-201598 19950608 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, 1149589 A1 20011031 EP 2001-201610 19950608 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, 219686 E 20020715 AT 1995-924122 19950608 Y APPLN. INFO: US 1994-258228 A 19940610 EP 1995-924122 A3 19950608 WO 1995-CA341 W 19950608	9534323 A2 19951221 WO 1995-CA341 19950608 W: AM, AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE, ES, FI, GB, GE, HU, JP, KE, KG, KP, KR, KZ, LK, LR, LT, LU, LV, MD, MG, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SI, SK, TJ, TT, UA, US, UZ RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG 2192454 AA 19951221 CA 1995-2192454 19950608 764029 A1 19970326 EP 1995-924122 19950608 764029 B1 20020626 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, MC, NL, PT, 1149588 A1 20011031 EP 2001-201598 19950608 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, 1149589 A1 20011031 EP 2001-201610 19950608 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, 1149589 T3 20030116 EP 1995-924122 19950608 Y APPLN. INFO: US 1994-258228 A 19940610 EP 1995-924122 A3 19950608 WO 1995-CA341 W 19950608

AR Compns. contg. genetically-detoxified pertussis holotoxin and a non-Bordetella or Bordetella antigen are used as adjuvant for vaccines. The modulated immune response enables immunogenic compns., including multivalent pediatric vaccines such as DTP, to be provided which produce a modulated immune response in the absence of extrinsic adjuvants such as alum. The adjuvanting effect achieved by the genetically-detoxified pertussis holotoxin enables at least the same level of adjuvanting effect to be achieved as previously attained by alum, without the undesirable side effects thereof. Also, disclosed are vaccines contg. the adjuvant compn. and other antigen, such as cancer-assocd. antigen and pathogen.

L22 ANSWER 18 OF 18 HCAPLUS COPYRIGHT 2003 ACS on STN

1994:80 HCAPLUS ACCESSION NUMBER: 120:80

DOCUMENT NUMBER:

TITLE: Pertussis toxin-induced alterations of murine hepatic drug metabolism following

administration of diphtheria and tetanus toxoids and pertussis

vaccine adsorbed

AUTHOR(S): Ansher, Sherry; Thompson, Walter; Bridgewater,

Jennifer; Snoy, Phil

CORPORATE SOURCE: Div. Bact. Prod., Food Drug Adm., Bethesda, MD, 20892,

USA

SOURCE: Infection and Immunity (1993), 61(10), 4240-7

CODEN: INFIBR; ISSN: 0019-9567

DOCUMENT TYPE:

Journal English

LANGUAGE: English

AB Administration of pertussis toxin (PT) in combination with diphtheria and tetanus toxoids adsorbed (DT vaccine) or with against additional diphtheria.

with acellular pertussis vaccine adsorbed and diphtheria and tetanus toxoids (APDT) elicits dose- and time-dependent alterations in hepatic drug metab. in mice. Cytochrome P 450 (P 450) levels were inhibited more than 50% at 7 days following a single injection of PT mixed with either vaccine. When combined with DT vaccine, 125 ng of PT was required to produce this effect, while as little as 16 ng of PT combined with APDT vaccine inhibited P 450 levels. The inhibition of P 450 levels is similar to that obsd. after a single injection of

diphtheria and tetanus toxoids and pertussis

vaccine adsorbed (DTP). Alterations of P 450 levels were accompanied by increased activities of quinone reductase but not with changes in plasma interleukin-6 or tumor necrosis factor levels. Other Bordetella

pertussis virulence factors, such as filamentous

hemagglutinin, fimbriae and pertactin, were also tested
but had no significant effect on hepatic drug metab. Endotoxin or prepns.

but had no significant effect on hepatic drug metab. Endotoxin or prepns. contg. endotoxin caused alternations in hepatic drug metab. within 24 h, concomitant with increased interleukin-6 and tumor necrosis factor levels, but these effects had resolved by 1 wk. DTP vaccine and prepns. contg. PT caused a marked induction of gamma interferon coincident with the maximal inhibition of P 450 levels. This effect was not present with DT or APDT vaccine alone, nor with endotoxin or any combination of factors that did not contain PT. These results demonstrate that PT is a necessary component for the sustained effects of DTP vaccine on hepatic drug metab. and suggest a role for gamma interferon in this process.

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     (FILE 'HOME' ENTERED AT 14:36:57 ON 03 SEP 2003)
     FILE 'REGISTRY' ENTERED AT 14:37:04 ON 03 SEP 2003
              1 S 287714-41-4/RN
L1
     FILE 'HCAPLUS' ENTERED AT 14:37:28 ON 03 SEP 2003
            101 S L1
L2
              0 S L2 AND PRD<199902
L3
              0 S L2 AND PD<19990201
L4
L5
              1 S L2 AND PRD<19990201
     FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, JICST-EPLUS, JAPIO' ENTERED AT
     14:42:37 ON 03 SEP 2003
     FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, JICST-EPLUS, JAPIO' ENTERED AT
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             74 S L2
L6
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              1 S E3
L7
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L8
              2 S L6 AND L7
              0 S L6 AND 19990201
L9
L10
              1 S L6 AND 1999?
L11
              0 S L6 AND 1998?
L12
              0 S L6 AND 1997?
L13
              3 S L8 OR L10
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                E FLORENT PATRICK/AU
                E STEPHENNE JEAN/AU
                E VANDECASSERIE CHRISTIAN/AU
     FILE 'REGISTRY' ENTERED AT 15:37:40 ON 03 SEP 2003
                E ALUMINUM PHOSPHATE/CN
L14
              2 S E3
                E ALUMINUM HYDROXIDE/CN
L15
              1 S E3
     FILE 'HCAPLUS' ENTERED AT 15:38:37 ON 03 SEP 2003
             18 S ?DIPHTHERIA? AND ?PERTUSSIS? AND ?TETANUS? AND (FHA? OR ?FILA
L16
              0 S L16 AND ?HEPATITIS?(W)?SURFACE?(W)?ANTIGEN?
L17
              7 S L16 AND ?HEPATITIS?
L18
L19
              1 S L16 AND ?ANTIGEN? (3A) HBS?
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FILE 'REGISTRY' ENTERED AT 15:45:34 ON 03 SEP 2003

E FHA/CN

L20

L21

E PERTACTIN/CN

FILE 'HCAPLUS' ENTERED AT 15:46:35 ON 03 SEP 2003 L22 18 S L16 OR L18 OR L19 OR L20 OR L21

3 S L16 AND ?IMMUN?(3A)(HIB? OR ?POLIO? OR ?HEPATITIS?(W)A)

4 S L16 AND (L14 OR ?ALUMINUM?(W)?PHOSPHAT? OR L15 OR ?ALUMINUM?(

Lucas 09/827,785

FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, JICST-EPLUS, JAPIO' ENTERED AT 15:47:06 ON 03 SEP 2003

L23	189	S L22	
L24	95	DUP REMOV	L23 (94 DUPLICATES REMOVED)
L25	20	S L24 AND	(?ADOLESC? OR ?ADULT?)
1.26	9	S L24 AND	?BOOSTER?(W)?VACCIN?

28 S L25 OR L26

L27

FILE 'HCAPLUS' ENTERED AT 15:55:57 ON 03 SEP 2003

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=> d que stat 127
              2 SEA FILE=REGISTRY ABB=ON "ALUMINUM PHOSPHATE"/CN
L14
              1 SEA FILE=REGISTRY ABB=ON "ALUMINUM HYDROXIDE"/CN
L15
             18 SEA FILE=HCAPLUS ABB=ON ?DIPHTHERIA? AND ?PERTUSSIS? AND
L16
                ?TETANUS? AND (FHA? OR ?FILAMENT?(W)?HEMAGGLUT?) AND (?PERTACTI
                N? OR 69K)
              7 SEA FILE=HCAPLUS ABB=ON L16 AND ?HEPATITIS?
L18
L19
              1 SEA FILE=HCAPLUS ABB=ON L16 AND ?ANTIGEN?(3A)HBS?
              3 SEA FILE=HCAPLUS ABB=ON L16 AND ?IMMUN?(3A)(HIB? OR ?POLIO?
L20
                OR ?HEPATITIS?(W)A)
              4 SEA FILE=HCAPLUS ABB=ON L16 AND (L14 OR ?ALUMINUM? (W)?PHOSPHAT
L21
                ? OR L15 OR ?ALUMINUM?(W)?HYDROXID?)
             18 SEA FILE=HCAPLUS ABB=ON L16 OR L18 OR L19 OR L20 OR L21
L22
            189 SEA L22
L23
             95 DUP REMOV L23 (94 DUPLICATES REMOVED)
L24
L25
             20 SEA L24 AND (?ADOLESC? OR ?ADULT?)
             9 SEA L24 AND ?BOOSTER?(W) ?VACCIN?
·L26
             28 SEA L25 OR L26
L27
=> d ibib abs 127 1-28
L27 ANSWER 1 OF 28
                        MEDLINE on STN
                    2003298982
ACCESSION NUMBER:
                                   IN-PROCESS
DOCUMENT NUMBER:
                    22710647
                               PubMed ID: 12825963
TITLE:
                    Reduced-antigen combined diphtheria-
                    tetanus-acellular pertussis vaccine
                     (Boostrix).
AUTHOR:
                    Chapman Therese M; Goa Karen L
                    Adis International Limited, Auckland, New Zealand..
CORPORATE SOURCE:
                    demail@adis.co.nz
SOURCE:
                    DRUGS, (2003) 63 (13) 1407-13; discussion: 1415-6.
                    Journal code: 7600076. ISSN: 0012-6667.
PUB. COUNTRY:
                    New Zealand
DOCUMENT TYPE:
                    Journal; Article; (JOURNAL ARTICLE)
LANGUAGE:
                    English
FILE SEGMENT:
                    IN-PROCESS; NONINDEXED; Priority Journals
ENTRY DATE:
                    Entered STN: 20030627
                    Last Updated on STN: 20030716
AB
     The reduced-antigen combined diphtheria-tetanus
     -acellular pertussis vaccine (dTpa) is intended for use as a
     booster dose in individuals aged > or =4 years. A single dose of dTpa
     elicited generally similar levels of antibodies against pertussis
     antigens (pertussis toxoid [PT], filamentous haemagglutinin [
     FHA] and pertactin [PRN]) as a similar monovalent
     pertussis booster vaccine (ap) in
     adolescents or adults, irrespective of their
     prevaccination serological status or vaccination history. Levels of
     antibodies directed against diphtheria toxoid were similar in
     recipients of dTpa or a licensed reduced-antigen combined
     diphtheria-tetanus booster vaccine
     (Td). However, levels of antitetanus antibodies were
     significantly higher in recipients of Td vaccines compared with those
     receiving dTpa. Similar serological response rates were observed for
     anti-PT, -FHA and -PRN between those receiving dTpa or ap and a
     similar high percentage of recipients of dTpa and the Td vaccines had
     seroprotective levels of antibodies against diphtheria and
     tetanus toxoid. The most frequently reported local adverse
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reactions following immunisation with dTpa included pain, redness and swelling; general symptoms included fatigue, headache and fever.

Lucas 09/827,785

L27 ANSWER 2 OF 28 MEDLINE on STN ACCESSION NUMBER: 2002394860 MEDLINE

DOCUMENT NUMBER: 22139235 PubMed ID: 12143270

TITLE: [Immunogenicity and reactogenicity of a reduced antigen

content diphtheria, tetanus and

acellular pertussis vaccine dTpa) in 10 to 11

years old children and in adults].

Inmunogenicidad y reactogenicidad de una vacuna de

difteria, tetanos, pertussis acelular de

contenido antigenico reducido (dTpa) en ninos de 10 a 11

anos de edad y en adultos.

AUTHOR: Abarca Katia; Valdivieso Francisca; Potin Marcela; Ibanez

Isabel; Vial Pablo

CORPORATE SOURCE: Laboratorio Glaxo SmithKline, Departamento de Pediatria y

Centro de Evaluacion de Vacunas, Pontificia Universidad

Catolica de Chile.. katia@med.puc.cl

SOURCE: REVISTA MEDICA DE CHILE, (2002 May) 130 (5) 502-10.

Journal code: 0404312. ISSN: 0034-9887.

PUB. COUNTRY: Chile

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: Spanish

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200210

ENTRY DATE: Entered STN: 20020730

Last Updated on STN: 20021019 Entered Medline: 20021018

AB BACKGROUND: New vaccination strategies are needed to control the

increasing problem of pertussis in teenagers and adults

. AIM: To determine the immunogenicity and reactogenicity of a

diphtheria-tetanus-acellular pertussis (dTpa)

vaccine with reduced antigen content. MATERIAL AND METHODS: A single dose of the dTpa vaccine was administered to 60 children 10 to 11 years old and 60 healthy adults. At the moment of vaccination and one month

later, antibody levels were measured against 3 B pertussis

antigens: anti-pertussis toxin (PT), anti-pertactin

(PRN) and anti-filamentous hemagglutinin (FHA

), as well as anti-tetanus and anti-diphtheria

antibodies. Local and general symptoms were registered during 14 days following vaccine administration. RESULTS: Antibody response for PT,

FHA and PRN was 98.3%, 100% and 100% in adults and

98.2%, 100% and 98.2% in children. Seropositivity for all

pertussis antigens was 100% in adults and in children

one month after vaccination. Geometric mean titers (GMT) significantly

increased in adults and children. The seroprotection level

achieved for tetanus and diphtheria antibodies one

month after vaccination was 96.7% for adults and 100% for

children, respectively. No serious adverse events were reported during the study. Among local symptoms pain was the most frequent (88-90%), but it was mostly mild or moderate. Solicited general symptoms observed for

children and adults, respectively, included headache (37% and

53%), fatigue (18% and 35%) gastrointestinal symptoms (18% and 25%) and fever (8% and 3%). Only one vaccinee had fever above 39 degrees C. CONCLUSIONS: The dTpa vaccine showed an adequate safety profile and

induced an intense immunological response to all antigens in

adults and children aged 10-11.

L27 ANSWER 3 OF 28 MEDLINE on STN ACCESSION NUMBER: 2001641994 MEDLINE

DOCUMENT NUMBER: 21551616 PubMed ID: 11694665

TITLE: Sustained efficacy during the first 6 years of life of

3-component acellular **pertussis** vaccines

administered in infancy: the Italian experience.

AUTHOR: Salmaso S; Mastrantonio P; Tozzi A E; Stefanelli P; Anemona

A; Ciofi degli Atti M L; Giammanco A

CORPORATE SOURCE: Laboratories of Epidemiology and Biostatistics and

Bacteriology and Medical Mycology, Istituto Superiore di

Sanita, Rome, Italy. (Stage III Working Group).

salmaso@iss.it

CONTRACT NUMBER: N01-AI-25138 (NIAID)

SOURCE: PEDIATRICS, (2001 Nov) 108 (5) E81.

Journal code: 0376422. ISSN: 1098-4275.

PUB. COUNTRY: United States
DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200112

ENTRY DATE: Entered STN: 20011107

Last Updated on STN: 20020123 Entered Medline: 20011214

BACKGROUND: In 1992-1993, a randomized, double-blind, placebo-controlled AΒ clinical trial of two 3-component acellular pertussis vaccines was started in 4 of Italy's 20 regions. During the trial, the children had been randomized to receive 3 doses of 1 of 2 acellular pertussis vaccines combined with diphtheria and tetanus toxoids (DT) or of a DT vaccine only, at 2, 4, and 6 months of age. Both diphtheria-tetanus-acellular pertussis (DTaP) vaccines, 1 manufactured by SmithKline Beecham (DTaP SB; Infanrix) and 1 manufactured by Chiron Biocine (DTaP CB; Triacelluvax), contain pertussis toxin (PT), filamentous hemagglutinin, and pertactin. The results of the first period of follow-up, which ended in 1994 (stage 1), showed that both vaccines had a protective efficacy of 84% in the first 2 years of life; when the trial's follow-up was extended under partial blinding until the participating children had reached 33 months of age (stage 2 of the follow-up), these high levels of efficacy had persisted. Therefore, the objective of this study was to estimate the persistence of protection from 3 to 6 years of age of the 2 3-component DTaP vaccines administered as primary immunization in infancy. METHODS: An unblinded prospective longitudinal study of vaccinated and unvaccinated children in 4 Italian regions, with active surveillance of cough, was conducted by study nurses, and Bordetella pertussis infections were confirmed laboratory. The present study (stage 3) included those children who completed stage 2 of the follow-up and were still under active surveillance as of October 1, 1995, accounting for 4217 children who had received DTaP SB (representing 94% of the vaccine's recipients in the initial phase of the trial), 4215 who had received DTaP CB (95% of the original recipients), and 266 who had received DT only (18% of the original recipients). Because the parents of most of the original DT placebo group accepted pertussis vaccination during stage 2 in 1995, an additional 856 children were recruited in the DT group at the initiation of stage 3. These additional children were identified from the census list of children born in the same period and living in the same areas as the trial participants but who had been vaccinated in infancy with DT only. Eligible children were included in stage 3 if they had no history of either pertussis or pertussis vaccination and if a serum sample obtained at the time of enrollment had undetectable immunoglobulin G (IgG) against PT.

Parental consent to participate in the study was obtained. Active



03/09/2003



surveillance for pertussis was conducted in the field by 72 study nurses through monthly contact with each family in the study. cough episode that lasted >/=7 days was considered to be a laboratory-confirmed infection by Bordetella pertussis if at least 1 of the following 5 criteria (listed in hierarchic order) was met: 1) B pertussis was obtained from nasopharyngeal culture (culture-confirmed infection); 2) the enzyme-linked immunosorbent assay (ELISA) IgG or IgA titer against PT in the convalescent-phase serum sample increased by at least 100% compared with the acute-phase sample; 3) the PT-neutralizing titers in Chinese hamster ovary assay in the convalescent-phase sample increased by at least 4-fold compared with the acute-phase sample; 4) the ELISA IgG or IgA titer against filamentous hemagglutinin in the convalescent-phase sample increased by at least 100% and the culture or the polymerase chain reaction assay on the nasopharyngeal aspirate was negative for B parapertussis; and 5) the ELISA IgG PT titer in 1 of the 2 serum samples exceeded the geometric mean titer computed on convalescent sera of the children with a culture-confirmed B pertussis infection in each study group. Incidence of laboratory-confirmed B pertussis infection, using case definitions that varied in terms of duration and type of cough, was computed and the proportion of cases prevented among DTaP recipients in comparison with DT recipients was calculated. RESULTS: A total of 391 laboratory-confirmed infections were identified in the 3-year follow-up period (138 DTaP SB, 126 DTaP CB, 127 DT recipients, respectively). The mean duration of cough in children with laboratory-confirmed infection was 48, 47, and 70 days for the DTaP SB, DTaP CB, and DT recipients, respectively; the mean duration of spasmodic cough was 15, 13, and 23 days, respectively. When using the primary case definition (ie, laboratory-confirmed B pertussis infection and >/=14 days of spasmodic cough or >/=21 days of any cough), the efficacy was 78% for the DTaP SB vaccine (95% confidence interval [CI]: 71%-83%) and 81% for the DTaP CB vaccine (95% CI: 74%-85%). When using the case definition based on a more severe clinical presentation (>/=21 days of spasmodic cough), the vaccine efficacy was 86% (95% CI: 79%-91%) for both vaccines. When using the case definition based on milder clinical presentation (any cough for >/=7 days), the efficacy was 76% (95% CI: 69%-81%) for the DTaP SB vaccine and 78% (95% CI: 72%-83%) for the DTaP CB vaccine. CONCLUSIONS: The persistence of protection through 6 years of age suggests that the fourth DTaP dose could be postponed until preschool age in children who received 3-component acellular pertussis vaccines in infancy, provided that immunity to diphtheria and tetanus is maintained. Additional booster doses could be administered at older ages to reduce reactogenicity induced by multiple administrations and to optimize the control of pertussis in adolescents and young adults.

L27 ANSWER 4 OF 28 MEDLINE on STN ACCESSION NUMBER: 2001299967 MEDLINE

DOCUMENT NUMBER: 20545884 PubMed ID: 11090714

TITLE: A randomized trial of two acellular pertussis

vaccines (dTpa and pa) and a licensed diphtheria-

tetanus vaccine (Td) in adults.

AUTHOR: Turnbull F M; Heath T C; Jalaludin B B; Burgess M A;

Ramalho A C

CORPORATE SOURCE: Centre for Immunisation Research, The New Children's

Hospital, NSW, Westmead, Australia.. fionat@nch.edu.au

SOURCE: VACCINE, (2000 Nov 8) 19 (6) 628-36.

Journal code: 8406899. ISSN: 0264-410X.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200105

ENTRY DATE: Entered STN: 20010604

Last Updated on STN: 20010604 Entered Medline: 20010531

A single blinded randomized controlled trial to compare the reactogenicity AΒ and immunogenicity of adult formulated dTpa and monovalent pa vaccines with a licensed Td vaccine. Five hundred and forty-eight healthy adults aged 19-70 years received a single injection of dTpa or separate injections of pa or Td (with the alternate vaccine 1 month later). Local and systemic reactions were monitored for 15 days after each vaccination. Serum antibody levels were measured immediately prior to and 1 month after vaccination. Antibody levels were measured 12 months after vaccination in 100 subjects. There was no difference in the total frequency of symptoms and signs between subjects receiving any of the three vaccines. There was a significantly lower incidence of local reactions following pa (60%) than dTpa (80%, P=0.002) or Td (93%, P=0.0008). The incidence of clinically significant (Grade 2 or 3) swelling (> or =20 mm) was higher for Td (20%, P=0.002) than for dTpa (11%) or for pa (2%), however, there were no other significant differences in the incidence of Grade 2 or 3 reactions between the vaccines. A high anti-pertussis seroconversion rate (>97%) against all the studied pertussis antigens was seen 1 month after vaccination with dTpa and pa. A total of 96 and 99% of subjects receiving dTpa and Td, respectively, had anti-diphtheria titres > or =0.01 IU/ml, and all but one subject had anti-tetanus titres > or =0.1 IU/ml after 1 month. Twelve months after vaccination the majority (90-100%) of the subjects were still seropositive for each antigen and although GMTs had decreased they were substantially higher than pre-vaccination levels. The dTpa vaccine was well tolerated and capable of eliciting an immune response against all the antigens in a broad spectrum of the adult population and could potentially replace Td for routine boosters in adults.

L27 ANSWER 5 OF 28 MEDLINE on STN ACCESSION NUMBER: 2000243108 MEDLINE

DOCUMENT NUMBER: 20243108 PubMed ID: 10783014

TITLE: Adult formulation of a five component acellular

pertussis vaccine combined with diphtheria
and tetanus toxoids and inactivated poliovirus
vaccine is safe and immunogenic in adolescents

and adults.

AUTHOR: Halperin S A; Smith B; Russell M; Scheifele D; Mills E;

Hasselback P; Pim C; Meekison W; Parker R; Lavigne P;

Barreto L

CORPORATE SOURCE: Department of Pediatrics, Dalhousie University and the IWK

Grace Health Centre, Halifax, Nova Scotia, Canada..

shalperin@iwkgrace.ns.ca

SOURCE: PEDIATRIC INFECTIOUS DISEASE JOURNAL, (2000 Apr) 19 (4)

276-83.

Journal code: 8701858. ISSN: 0891-3668.

PUB. COUNTRY: United States
DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

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200006

ENTRY MONTH: ENTRY DATE:

Entered STN: 20000629

Last Updated on STN: 20000629 Entered Medline: 20000616

AB BACKGROUND: Pertussis is increasingly recognized as an important

cause of cough illness in adolescents and adults.

PURPOSE: To evaluate the safety and antibody response to a single dose of

an adult formulation of a five component (pertussis

toxoid, filamentous hemagglutinin, pertactin

, fimbriae 2 and 3) acellular pertussis vaccine (aP) combined

with diphtheria and tetanus toxoids (TdaP) and

inactivated poliovirus vaccine (TdaP-IPV) in adolescents and adults and to assess the response to a second dose of the

acellular pertussis vaccine in a subset of the adults.

POPULATION AND SETTING: The study addressed 1207 healthy participants (736

adults and 466 adolescents) recruited in five Canadian

communities. STUDY DESIGN: In a randomized, observer-blind, controlled

clinical trial, adult participants received Td followed at a

separate visit by aP, TdaP followed by IPV or TdaP-IPV;

adolescents received Td-IPV followed at a separate visit by aP or

TdaP-IPV. A subgroup of adults was given a booster of aP 1

month after TdaP. OUTCOME MEASURES: Antibody titers measured before and 1 month after each immunization; adverse events enumerated at 24 h, 72 h and 8 to 10 days. RESULTS: The aP vaccine given by itself was associated with adverse events less frequently than were Td, Td-IPV, TdaP or TdaP-IPV vaccines, but reaction rates did not differ significantly among the latter

products. The antibody response against Bordetella **pertussis** antigens was vigorous in all groups, although **adults** given the TdaP-IPV vaccine had lower antibody titers against **filamentous**

hemagglutinin, pertactin, diphtheria and

tetanus antibodies than those given TdaP vaccine. Similarly adolescents given TdaP-IPV had lower antibody titers against pertussis toxin, filamentous hemagglutinin,

fimbriae and agglutinins than those given Td-IPV and aP alone. A second dose of acellular pertussis vaccine was not associated with increased adverse events in adults but elicited increased antibody titers over that achieved by a single dose only against pertussis toxin. CONCLUSIONS: This adult formulation

five component aP vaccine given as TdaP-IPV is safe and immunogenic in adolescents and adults and is a candidate vaccine for

adolescent and adult immunization programs.

L27 ANSWER 6 OF 28 MEDLINE on STN ACCESSION NUMBER: 2000182107 MEDLINE

DOCUMENT NUMBER: 20182107 PubMed ID: 10715521

TITLE: A randomised controlled trial with a diphtheria-

tetanus-acellular pertussis (dTpa)

vaccine in adults.

AUTHOR: Van der Wielen M; Van Damme P; Joossens E; Francois G;

Meurice F; Ramalho A

CORPORATE SOURCE: Centre for the Evaluation of Vaccination, Epidemiology and

Community Medicine, University of Antwerp, Antwerp,

Belgium.

SOURCE: VACCINE, (2000 Apr 14) 18 (20) 2075-82.

Journal code: 8406899. ISSN: 0264-410X.

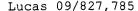
PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English



FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200007

ENTRY DATE:

Entered STN: 20000720

Last Updated on STN: 20021218 Entered Medline: 20000711

The aim of this assessor-blinded trial was to compare the immunogenicity AB

and reactogenicity of a candidate diphtheria, tetanus

toxoids and acellular pertussis vaccine with reduced antigen

content for diphtheria and pertussis (dTpa) with a licensed reduced adult-type diphtheria-tetanus

vaccine Td (reduced diphtheria content) and with an experimental candidate monovalent acellular pertussis vaccine with reduced antigen content (pa). The dTpa and pa vaccines had identical pertussis antigen content. A total of 299 healthy adults

(> or =18 years, mean age: 30.1 years+/-10.7) were randomised into 3 groups to receive a single dose of one of the study vaccines. In all groups, clinically significant reactions (severe) were infrequent (0-6%)

and no serious adverse events were reported during the study. The

incidence of local and systemic reactions following the administration of dTpa was comparable to the Td vaccine group. Of the total study group,

prior to vaccination 52. 3 and 93.2% of the subjects had antidiphtheria and anti-tetanus antibody levels > or = 0.1

IU/ml, respectively; and 73.1, 98.2 and 74.5% of the subjects were

seropositive for pertussis toxin (PT), filamentous

hemagglutinin (FHA) and pertactin (PRN)

antibodies, respectively. One month after vaccination, a similar percentage of subjects in the dTpa and Td groups had anti-

diphtheria (88.4% vs 90. 1%) and anti-tetanus (100% vs 98.9%) antibody levels > or =0.1 IU/ml. Similar anti-FHA (100%)

and anti-PRN (98.9%) vaccine response rates were seen in the dTpa and pa groups, while the anti-PT vaccine response rates were 96.8 and 100.0%, respectively. The dTpa vaccine is as well tolerated and immunogenic as the licensed Td vaccine, and additionally, can also boost antibodies

against pertussis.

MEDLINE on STN L27 ANSWER 7 OF 28 2000087286 MEDLINE ACCESSION NUMBER:

DOCUMENT NUMBER:

20087286 PubMed ID: 10618527

TITLE:

An adult formulation of a five-component acellular pertussis vaccine combined with diphtheria and tetanus toxoids is safe and immunogenic in adolescents and adults

AUTHOR:

Halperin S A; Smith B; Russell M; Hasselback P; Guasparini R; Skowronski D; Meekison W; Parker R; Lavigne P; Barreto L Departments of Pediatrics, Clinical Trials Research Center,

CORPORATE SOURCE:

Dalhousie University and the IWK Grace Health Centre, 5850

University Avenue, Halifax, Canada...

shalperin@iwkgrace.ns.ca

SOURCE:

VACCINE, (2000 Jan 31) 18 (14) 1312-9. Journal code: 8406899. ISSN: 0264-410X.

PUB. COUNTRY:

ENGLAND: United Kingdom

DOCUMENT TYPE:

(CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200003

ENTRY DATE:

Entered STN: 20000320

Last Updated on STN: 20000320

Entered Medline: 20000307

AB Pertussis is increasingly being recognized as an important cause of cough illness in adolescents and adults. To evaluate the safety and immunogenicity of an adult formulation of a five-component (pertussis toxoid, filamentous hemagglutinin, pertactin, fimbriae 2 and 3) acellular pertussis vaccine combined with diphtheria and tetanus toxoids, we randomly allocated 749 healthy adolescents and adults from 12-54 years of age recruited from five Canadian communities to receive either tetanusdiphtheria vaccine (Td), acellular pertussis vaccine (aP) or combined diphtheria-tetanus-acellular pertussis vaccine (TdaP). Subjects and personnel were unaware of the vaccine allocation. Antibody levels were measured before and one month postimmunization; adverse events were collected at 24 and 72 h and 8 to 10 days. Adverse events were reported in similar frequency amongst the three vaccine groups. Moderate pain at the injection site was reported less frequently in the aP group than the TdaP group (10.7% compared to 19.4%; relative risk 0.6, 95% confidence interval 0.3-0.9). Chills were reported less frequently after Td (5.3%) than after TdaP (12.5%; relative risk 0.4, 95% confidence interval 0.2-0.9). There were no statistically significant differences between recipients of Td and TdaP in tetanus and diphtheria antitoxin levels achieved. Antibody response against Bordetella pertussis antigens was vigorous in all groups although recipients of aP alone had higher levels of antibody levels against pertussis toxoid, fimbriae, and agglutinins and lower antibody levels against pertactin than did TdaP recipients. We conclude that this adult formulation 5-component acellular pertussis vaccine is safe and immunogenic in adolescents and adults and is a candidate vaccine for adolescent and adult immunization programs.

L27 ANSWER 8 OF 28 MEDLINE on STN ACCESSION NUMBER: 2000085384 MEDLINE

DOCUMENT NUMBER: 2008538

20085384 PubMed ID: 10617748

TITLE:

Safety and immunogenicity of six acellular

pertussis vaccines and one whole-cell

pertussis vaccine given as a fifth dose in four- to

six-year-old children.

AUTHOR: Pichichero M E; Edwards K M; Anderson E L; Rennels M B;

Englund J A; Yerg D E; Blackwelder W C; Jansen D L; Meade B

D.

CORPORATE SOURCE: Department of Microbiology, University of Rochester School

of Medicine, Rochester, New York, USA..

mepo@uhuratcc.rochester.edu

CONTRACT NUMBER:

NO1-AI02645 (NIAID)

NO1-AI05049 (NIAID) NO1-AI05051 (NIAID)

+

SOURCE: PEDIATRICS, (2000 Jan) 105 (1) e11.

Journal code: 0376422. ISSN: 1098-4275.

PUB. COUNTRY: DOCUMENT TYPE:

United States (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(MULTICENTER STUDY)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200001

ENTRY DATE:

Entered STN: 20000131

Last Updated on STN: 20010521 Entered Medline: 20000114

OBJECTIVE: To evaluate the safety and immunogenicity of 6 different AΒ acellular pertussis vaccines combined with diphtheria and tetanus toxoids (DTaP) and with 1 licensed whole-cell pertussis vaccine (DTwP) as a fifth dose in children who had previously received the same DTaP, a different DTaP, or DTwP as primary and fourth-dose vaccinations. METHODS: Healthy 4- to 6-year-old children were enrolled at 5 National Institute of Allergy and Infectious Diseases Vaccine Treatment and Evaluation Units to receive a fifth dose of a DTaP or DTwP vaccine. All had been randomly assigned to receive 3 primary doses of DTaP or DTwP at 2, 4, and 6 months and a fourth-dose booster at 15 to 20 months of age as part of earlier National Institutes of Health multicenter acellular pertussis vaccine trials. Parents recorded the occurrence and magnitude of fever, irritability, and injection site redness, swelling, and pain for 3 days after vaccination. Sera obtained before and 1 month after the booster vaccination were analyzed by enzyme-linked immunosorbent assay for antibody to pertussis toxin, filamentous hemagglutinin, fimbriae, pertactin, and diphtheria and tetanus toxoid. Safety and/or immunogenicity data are reported for 317 children who received DTaP and 10 children who received DTwP. RESULTS: Fever and moderate or severe irritability were uncommon following the fifth dose of DTaP vaccine and were generally less frequent than following the fourth dose. However, for the DTaP vaccine groups, redness, swelling, and pain increased in prevalence compared with the fourth dose. The time course and frequency of reactions following DTaP vaccination were generally similar in children who received the same DTaP, a different DTaP, or DTwP for previous doses in the 5- dose series. No significant differences among the DTaP vaccines were detected in the occurrence of reactions, but the statistical power to

of reactions following DTaP vaccination were generally similar in children who received the same DTaP, a different DTaP, or DTwP for previous doses in the 5- dose series. No significant differences among the DTaP vaccines were detected in the occurrence of reactions, but the statistical power to detect differences was limited by sample size. Significant increases in antibodies directed against the included antigens were observed for all DTaP vaccines in paired pre- and post-fifth dose sera. Post-fifth dose antibody concentrations differed significantly among the DTaP vaccines. Some children in the study showed an antibody response to an antigen not reported to be in the DTaP vaccine. CONCLUSION: All the studied DTaP vaccines performed similarly with regard to reactions, whether given as a fifth sequential dose of the same vaccine, a mix of different DTaP vaccines in the 5-dose sequence, or after 3 DTwP and 1 DTaP vaccinations. Large injection site reactions occurred more frequently after the fifth dose of DTaP than after the previous 4 doses. A fifth dose of all DTaP vaccines induced an antibody response to those antigens contained in the vaccine. No DTaP was consistently most or least reactogenic or immunogenic.

L27 ANSWER 9 OF 28 MEDLINE on STN ACCESSION NUMBER: 2000070847 MEDLINE

DOCUMENT NUMBER: 20070847 PubMed ID: 10600191

TITLE: DTaP vaccines from north american vaccine (NAVA):

composition and critical parameters.

AUTHOR: Heron I; Chen F M; Fusco J

CORPORATE SOURCE: North American Vaccine Inc., Columbia, MD, USA. SOURCE: BIOLOGICALS, (1999 Jun) 27 (2) 91-6. Ref: 11

Journal code: 9004494. ISSN: 1045-1056.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200001

ENTRY DATE:

Entered STN: 20000131

Last Updated on STN: 20000131 Entered Medline: 20000114

NAVA's acellular pertussis vaccine is based on highly purified AB pertussis toxin (PT) inactivated with H(2)O(2). PT was analysed using advanced biochemical methodology including mass spectroscopy (LC/MS), yielding mass and peptide mapping information on the subunits. Pertactin, adenylate cyclase, and Fim 1, 2 were below detection levels and only trace amounts of filamentous haemagglutinin (FHA) have been identified as a minor impurity. The vaccine does not induce anti-FHA antibodies during the course of a 3-dose primary immunization series in infants. B and T cell epitopes are preserved to a higher extent after H(2)O(2)detoxification when compared with chemical inactivation with formaldehyde, thus providing new information explaining why vaccines employing formaldehyde detoxified PT may need additional pertussis components added to induce high levels of protection. Anti-PT antibodies generated by NAVA diphtheria, tetanus , and acellular pertussis vaccine (DTaP) showed a positive correlation with protection against WHO-defined pertussis. safety profiles for these vaccines showed low reactogenicity with no serious adverse events due to the vaccines. Copyright 1999 The International Association for Biologicals.

L27 ANSWER 10 OF 28 MEDLINE on STN ACCESSION NUMBER: 2000054933 MEDLINE

DOCUMENT NUMBER:

20054933 PubMed ID: 10586004

TITLE:

Acellular vaccines containing reduced quantities of

pertussis antigens as a booster in

adolescents.

AUTHOR:

Minh N N; He Q; Ramalho A; Kaufhold A; Viljanen M K;

Arvilommi H; Mertsola J

CORPORATE SOURCE:

National Public Health Institute, Department in Turku,

Finland.. tranminh@utu.fi

SOURCE:

PEDIATRICS, (1999 Dec) 104 (6) e70. •

Journal code: 0376422. ISSN: 1098-4275.

PUB. COUNTRY: DOCUMENT TYPE:

United States (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

FILE SEGMENT:

Priority Journals -

ENTRY MONTH:

199912

ENTRY DATE:

Entered STN: 20000113

Last Updated on STN: 20010521 Entered Medline: 19991217

OBJECTIVE: To evaluate the immunogenicity and reactogenicity of an acellular pertussis vaccine (pa) either formulated with diphtheria and tetanus toxoids (dTpa) or administered consecutively with a licensed tetanus and diphtheria vaccine (Td) as a 5th dose in adolescents. METHODS: A total of 510 healthy children 10 to 13 years of age were assigned randomly, using a single-blind design, to receive either the dTpa vaccine or the Td vaccine with the pa vaccine 1 month later. The quantities of 3 pertussis antigens (pertussis toxin, filamentous hemagglutinin, and pertactin) in the dTpa and the pa vaccines were one third of those of the Infanrix vaccine (SmithKline)

vaccines were one third of those of the Infanrix vaccine (SmithKline Beecham Biologicals, Rixensart, Beligium) licensed for use in infants. For enzyme-linked immunosorbent assay measurement of serum immunoglobulin

G antibodies and proliferation assay of peripheral blood mononuclear cells, blood samples were obtained before and 1 month after immunization. Local and systemic reactions were recorded on diary cards for 15 days after immunization. RESULTS: After immunization with dTpa or pa, significant and comparable rises in geometric mean values of antibodies (12- to 46-fold) and proliferations (8- to 18-fold) to each of the pertussis antigens were noted. After immunization with dTpa or Td, significant rises in geometric mean values of antidiphtheria and antitetanus antibodies (35- to 76-fold) were noted, and all subjects had values of these antibodies >/=.1 international units/mL. dTpa and pa vaccines were at least as well tolerated as the licensed Td vaccine. CONCLUSIONS: Booster immunization of adolescents with an acellular vaccine containing reduced quantities of pertussis antigens in addition to diphtheria and tetanus toxoids induces good responses in both arms of the immune system without an increase in adverse reactions.

MEDLINE on STN L27 ANSWER 11 OF 28

1998379562 ACCESSION NUMBER: MEDLINE

DOCUMENT NUMBER: 98379562 PubMed ID: 9713935

Antibody and cell-mediated immune responses to booster TITLE:

immunization with a new acellular pertussis

vaccine in school children.

AUTHOR: Tran Minh N N; Edelman K; He Q; Viljanen M K; Arvilommi H;

Mertsola J

CORPORATE SOURCE: National Public Health Institute, Department in Turku,

Finland.. tranminh@utu.fi

SOURCE: VACCINE, (1998 Oct) 16 (17) 1604-10.

Journal code: 8406899. ISSN: 0264-410X.

PUB. COUNTRY: ENGLAND: United Kingdom

(CLINICAL TRIAL) DOCUMENT TYPE:

Journal: Article: (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

Priority Journals FILE SEGMENT:

ENTRY MONTH: 199810

Entered STN: 19981029 ENTRY DATE:

> Last Updated on STN: 20000303 Entered Medline: 19981022

235 healthy 10-12 years old school children were randomly immunized with AB either a booster dose of diphtheria-tetanus-acellular pertussis (dTap) or diphtheria-tetanus (dT)

vaccine. For this booster immunization designed for school children and adults, the quantities of Bordetella pertussis antigens in the dTap vaccine had been reduced to one third of those of the Infanrix vaccine (SmithKline Beecham) commonly used for infants. IgG antibodies and cell-mediated immune (CMI) responses to pertussis toxin

(PT), pertactin (PRN) and filamentous

hemagglutinin (FHA) were assessed by an enzyme immunosorbent assay and in vitro proliferation of peripheral blood mononuclear cells, respectively. Before immunization, 55%, 80% and 99% of children had detectable serum IgG antibodies to PT, PRN and FHA, whereas CMI response was found in 35%, 27% and 50% of children, respectively. After immunization, a 20-30-fold increase in geometric mean level (GML) of antibodies to the pertussis antigens occurred and CMI response to PT, PRN and FHA was seen in 88%, 94% and 100% of children, respectively. Adverse reactions following the immunization were rare. The results show that booster immunization with an acellular pertussis vaccine with reduced concentrations of antigens induces both antibody and CMI responses and support further studies of this

pertussis vaccine in school children.

L27 ANSWER 12 OF 28 MEDLINE on STN ACCESSION NUMBER: 1998010670 MEDLINE

DOCUMENT NUMBER: 98010670 PubMed ID: 9346976

TITLE: A safety and immunogenicity comparison of 12 acellular

pertussis vaccines and one whole-cell

pertussis vaccine given as a fourth dose in 15- to

20-month-old children.

AUTHOR: Pichichero M E; Deloria M A; Rennels M B; Anderson E L;

Edwards K M; Decker M D; Englund J A; Steinhoff M C;

Deforest A; Meade B D

CORPORATE SOURCE: Department of Microbiology and Immunology, University of

Rochester School of Medicine, Rochester, New York 14642,

USA

CONTRACT NUMBER: NO1-AI05049 (NIAID)

NO1-AI05151 (NIAID) NO1-AI15096 (NIAID)

SOURCE:

PEDIATRICS, (1997 Nov) 100 (5) 772-88.

Journal code: 0376422. ISSN: 1098-4275.

PUB. COUNTRY:

United States

DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(MULTICENTER STUDY)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE:

English

FILE SEGMENT:

Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH:

199711

ENTRY DATE:

Entered STN: 19971224

Last Updated on STN: 20010521 Entered Medline: 19971113

AB OBJECTIVE: To compare the safety and immunogenicity of 12 different acellular pertussis vaccines combined with diphtheria and tetanus toxoids (DTaP) with one licensed diphtheria

, tetanus, and whole-cell pertussis vaccine (DTwP) as a fourth-dose booster in children who had previously received DTaP or DTwP primary vaccinations. METHODS: Healthy 15- to 20-month-old children were enrolled at six National Institutes of Health Vaccine Treatment and Evaluation Units. All had been randomly assigned to receive three primary doses of DTaP or DTwP at 2, 4, and 6 months of age as part of an earlier National Institutes of Health multicenter trial of DTaP vaccines in the same Vaccine Treatment and Evaluation Units. Parents recorded the occurrence and magnitude of fever; irritability; and injection site redness, swelling, and pain for 3 days after vaccination. Sera obtained before and 1 month after the booster vaccination were

analyzed for antibody to pertussis toxin (PT),

filamentous hemagglutinin (FHA), fimbriae (FIM), and pertactin (PRN). Diphtheria and

tetanus toxoid as well as PT neutralizing (Chinese hamster ovary cell) and whole-cell agglutinating antibodies were measured on a subset of sera. RESULTS: A total of 1293 children contributed fourth-dose reaction data. Reactions were less frequent after DTaP than after DTwP. For children vaccinated with a fourth dose of DTaP, which was the same DTaP as received in the primary series, fever and injection site redness, swelling, and pain increased in prevalence compared with the third dose in the primary series. For children receiving DTaP as a fourth dose, injection site redness and swelling occurred more frequently in DTaP-primed than in DTwP-primed children. Variation in the occurrence of reactions among DTaP vaccines was observed. A total of 1160 paired pre-

and postvaccination sera were available for analysis. Serum antibody concentrations before boosting were lower than those obtained 1 month after the primary immunization. After the fourth dose, significant increases in antibodies directed against the included antigens were observed for all vaccines; postbooster vaccination antibody titers differed significantly among the DTaP vaccines. For children primed and boosted with the same DTaP, antibody levels were not directly related to the quantity of antigen included for PT, FHA , and FIM; for PRN, there was a closer relationship. Some DTaP vaccines given as fourth-dose boosters elicited antibody to PRN or FIM in some vaccinees, although the DTaP vaccines were not reported to contain these antigens; these responses were observed more frequently in DTwP-primed children. Agglutinin antibody rises were observed in all groups immunized with four doses of a DTaP vaccine containing FHA or PRN, regardless of whether the vaccine included FIM. Diphtheria and tetanus antibody levels exceeded the presumed protective concentration (0.1 IU/mL for diphtheria and 0.01 IU/mL for tetanus) after the fourth dose for all vaccinees. CONCLUSION: Although differences were observed in reaction rates among the DTaP vaccines given as a fourth dose, the DTaP vaccines were, in general, associated with fewer adverse events than a US-licensed DTwP. For DTaP vaccines, fever; irritability; and injection site pain, redness, and swelling occurred more frequently after the fourth dose than after the third dose of the same vaccine in the primary series. No DTaP was consistently most or least reactogenic or immunogenic. Although serologic correlates of pertussis immunity are not defined, it is clear that most DTaP vaccines can stimulate comparable or higher serum antibody responses than DTwP for those antigens contained in the vaccine.

L27 ANSWER 13 OF 28 MEDLINE on STN 97418358 ACCESSION NUMBER: MEDLINE

97418358 PubMed ID: 9272363 DOCUMENT NUMBER:

TITLE: Bordetella pertussis-specific Th1/Th2 cells

generated following respiratory infection or immunization

with an acellular vaccine: comparison of the T cell

cytokine profiles in infants and mice.

Ryan M; Gothefors 'L; Storsaeter J; Mills K H AUTHOR:

CORPORATE SOURCE: Infection and Immunity Laboratory, Maynooth College, Co

Kildare, Ireland.

SOURCE: DEVELOPMENTS IN BIOLOGICAL STANDARDIZATION, (1997) 89

297-305.

Journal code: 0427140. ISSN: 0301-5149.

PUB. COUNTRY: Switzerland

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals; AIDS

ENTRY MONTH: 199710

ENTRY DATE: Entered STN: 19971024

Last Updated on STN: 19990129 Entered Medline: 19971015

AΒ In an investigation of cell-mediated immunity against Bordetella pertussis, we found that B. pertussis infection in infants and in mice was associated with the induction of antigen-specific T cells that secrete IFN-q and IL-2, but not IL-4 or IL-5. This cytokine profile is characteristic of Th1 cells that mediate cellular immune responses against a range of intracellular pathogens. An examination of cytokine production following immunization with a three-component acellular vaccine, comprising inactive PT, FHA and pertactin adsorbed to alum, demonstrated that spleen cells from vaccinated mice produced high levels of IL-5, but no detectable IFN-q and low levels of IL-2. In contrast, peripheral blood mononuclear cells from vaccinated infants produced IL-2, IL-5 and IFN-g. These findings highlight significant differences in the immune responses generated by vaccination and natural infection with B. **pertussis** and demonstrate that the T-cell response induced with an acellular vaccine, although dominated by type 2 cytokines in mice, is more heterogeneous in infants with a ThO or mixed Th1/Th2 cytokine profile.

L27 ANSWER 14 OF 28 MEDLINE on STN ACCESSION NUMBER: 97418347 MEDLINE

DOCUMENT NUMBER: 97418347 PubMed ID: 9272352

TITLE: Diagnostic pertussis serology in the recent

clinical efficacy studies of acellular vaccines.

AUTHOR: Hallander H O

CORPORATE SOURCE: Swedish Institute for Infectious Disease Control,

Stockholm, Sweden.

SOURCE: DEVELOPMENTS IN BIOLOGICAL STANDARDIZATION, (1997) 89

205-12.

Journal code: 0427140. ISSN: 0301-5149.

PUB. COUNTRY: Switzerland

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199710

ENTRY DATE: Entered STN: 19971024

Last Updated on STN: 19990129 Entered Medline: 19971015

AΒ The laboratory routine used and the criteria applied for serological case confirmation in vaccine efficacy trials have a direct influence on the identification of cases, which consequently may also affect the estimation of vaccine efficacy (VE). Some differences in the application of serological confirmation criteria among the recent clinical studies of pertussis vaccines include the level of increase in titre and use of single specimen diagnostics. Additionally, the use of pre-exposure serum specimen collections increases the sensitivity of serological confirmation. In the 1992-95 Stockholm trial, a regimen to collect serum samples systematically was introduced; using acute- and convalescent-phase sera from the cough episodes, the proportion of all cases which were serologically confirmed was 25%. When pre-exposure sera were also available, the proportion was 35%; the increased sensitivity was differential by vaccine group and affected the estimated VE to some extent. Therefore, with the different application of serological methods among the various efficacy studies, direct comparisons between studies should be made with great caution.

L27 · ANSWER 15 OF 28 MEDLINE on STN ACCESSION NUMBER: 97262577 MEDLINE

DOCUMENT NUMBER: 97262577 PubMed ID: 9108861

TITLE: Reactogenicity and immunogenicity of a booster dose of a

combined diphtheria, tetanus, and

tricomponent acellular **pertussis** vaccine at fourteen to twenty-eight months of age.

AUTHOR: Schmitt H J; Beutel K; Schuind A; Knuf M; Wagner S;

Muschenborn S; Bogaerts H; Bock H L; Clemens R

CORPORATE SOURCE: Children's Hospital, University of Mainz, Germany.

SOURCE: JOURNAL OF PEDIATRICS, (1997 Apr) 130 (4) 616-23.

Journal code: 0375410. ISSN: 0022-3476.

PUB. COUNTRY: United States
DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE:

English

FILE SEGMENT:

Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH:

199705

ENTRY DATE:

Entered STN: 19970514

Last Updated on STN: 20020125 Entered Medline: 19970508

OBJECTIVES: The primary objective was to assess the nature and incidence AΒ

of adverse events after a fourth dose of a tricomponent acellular

pertussis-diphtheriatetanus vaccine given in the second

year of life after primary vaccination with the same vaccine at 3, 4, and 5 months of age. A secondary objective was to analyze the immunogeniecity

of the booster vaccination. DESIGN: Of the 5361 children enrolled (aged 14 to 28 months), adverse reactions were

specifically solicited from the first 1863 enrollees for the first 4 days after vaccination and then were unsolicited for the remainder of the 4 weeks of follow-up (group 1). In the next 3498 subjects, safety and reactogenicify were entirely unsolicited for this 4-week period (group 2). Immunogenicity was analyzed by means of prebooster and postbooster serum antibody titers for all vaccine components in a random subgroup of 197 children from group 1. RESULTS: Soliciting symptoms elicited reports of at least one symptom in 1314 of 1809 children in group 1 (72.6%), including 993 (54.9%) with local and 885 (48.9%) with general symptoms

during the first 4 days after vaccination. When symptoms were gathered in an unsolicited fashion, only 580 of 3498 children in group 2 (16.6%) had a reported symptom during this time, consisting of 344 (9.8%) local and 319 (9.1%) general symptoms, respectively. An unsolicited symptom, areactive edematous swelling of the whole thigh, occurred in 62 children (1.1%),

with 45 and 17 reports in groups 1 and 2, respectively. The vast majority of all reported symptoms were mild to moderate, and all children recovered without sequelae. Fourteen serious adverse events were reported, but none was considered to be related to the vaccination. Immunogenicity analysis

showed a vaccine response to pertussis toxin in 99.5% of subjects, to filamentous hemagglutinin in 98.5%, and

to pertactin (69 kd outer membrane protein) in 99%. All subjects had postvaccination antibody titers of 0.1 IU/ml or greater

against diphtheria and tetanus toxoids.

L27 ANSWER 16 OF 28 MEDLINE on STN ACCESSION NUMBER: 97051894 MEDLINE

DOCUMENT NUMBER: 97051894 PubMed ID: 8896529

TITLE: Overview of the clinical development of a

diphtheria-tetanus--acellular

pertussis vaccine.

AUTHOR: Bogaerts H; Capiau C; Hauser P; Mareschal J C; Melot V;

CORPORATE SOURCE: SmithKline Beecham Biologicals, Rixensart, Belgium. JOURNAL OF INFECTIOUS DISEASES, (1996 Nov) 174 Suppl 3 SOURCE:

S276-80.

Journal code: 0413675. ISSN: 0022-1899.

PUB. COUNTRY:

United States

(CLINICAL TRIAL) DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE:

ENTRY DATE:

English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH:

199612 Entered STN: 19970128

Last Updated on STN: 19970128 Entered Medline: 19961204

AB A tricomponent acellular pertussis vaccine containing pertussis toxoid, filamentous hemagglutinin, and pertactin combined with diphtheria and tetanus toxoids (DTPa) was developed as a less reactogenic alternative to the traditional whole cell pertussis (DTPw) vaccine. In studies of DTPa as a primary vaccination and as a booster dose in DTPa- or DTPw-primed children, the vaccine was safe, well-tolerated, and highly immunogenic; it was less reactogenic than DTPw but at least as immunogenic. A three-dose primary vaccination sequence with DTPa vaccine in the first 6 months of life protects against pertussis under conditions of high infectious pressure. These results support the licensing of the vaccine for primary and booster vaccination in a growing number of countries.

Combined DTPa-based pediatric vaccines are in clinical development.

L27 ANSWER 17 OF 28 MEDLINE on STN ACCESSION NUMBER: 96384595 MEDLINE

DOCUMENT NUMBER: 96384595 PubMed ID: 8792483

TITLE: Antibody response and reactions to completion of a

four-dose series with a two- or three-component acellular

pertussis vaccine compared to whole cell

pertussis vaccine.

AUTHOR: Pichichero M E; Green J L; Francis A B; Marsocci S M;

Murphy A M; Buscarino C

CORPORATE SOURCE: Department of Microbiology and Immunology, University of

Rochester Medical Center, New York 14642, USA.

SOURCE: SCANDINAVIAN JOURNAL OF INFECTIOUS DISEASES, (1996) 28 (2)

159-63.

Journal code: 0215333. ISSN: 0036-5548.

PUB. COUNTRY: Sweden

DOCUMENT TYPE: (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH:. 199612

ENTRY DATE: Entered STN: 19970128

Last Updated on STN: 19970128 Entered Medline: 19961204

AB We compared the reactions and immunogenicity of DT acellular pertussis (DTaP) vaccines containing pertussis toxoid (PT) and filamentous haemagglutinin (FHA) (2-component DTaP) or PT, FHA and pertactin (PRN) (3-component DTaP vaccine) with a whole cell (DTwP) vaccine as a fourth-dose booster in 158 children (15-20 months old) who had received 3 primary vaccine doses with the same vaccines at 2, 4 and 6 months of age. Randomization was 3:1 for DTaP:DTwP and all children received concomitant oral polio vaccine (OPV). Fever (> 38 degrees C), irritability, local injection site erythema (> 10 mm), swelling (> 10 mm), and pain (moderate or more) were assessed for 72 h after booster vaccination. DTwP vaccinees had a higher incidence of fever (29.4%) and injection-site pain (45.7%) than 3-component DTaP vaccinees (fever, 9.6%, p < 0.02; injection-site pain, 3.8%, p < 0.01); 2-component DTaP vaccinees had less injection-site pain (8.3%, p < 0.01). Pre- and post-vaccination immunoglobulin G (IgG) antibody was measured by enzyme-linked immunosorbent assay (ELISA). and post anti-PT levels were similar for all 3 vaccine groups. Anti-FHA antibody was higher pre- and post-vaccination for both DTaP vaccine groups compared with the DTwP vaccinees (p < 0.01 for all comparisons). For 3-component DTaP vaccinees, anti-PRN antibody was higher pre- and post-vaccination compared to DTwP vaccinees (p < 0.01 for

both comparisons). **Tetanus** antibody was higher pre- and post-vaccination for DTwP versus both DTaP vaccine groups, and **diphtheria** antibody was similar pre- and post-vaccination for all 3 groups. These 2- and 3-component DTaP vaccines produce less common reactions and comparable or higher antibody to the components they contain (except **tetanus**) than DTwP vaccine when given as a booster to 15- to 20-month-old children previously primed with the same vaccine.

L27 ANSWER 18 OF 28 MEDLINE on STN ACCESSION NUMBER: 96055299 MEDLINE

DOCUMENT NUMBER: 96055299 PubMed ID: 8522378

TITLE: Serum antibodies to the components of diphtheria-

tetanus-pertussis vaccine in Polish children related to vaccination status. Torbicka E; Lagergard T; Trollfors B

AUTHOR: Torbicka E; Lagergard T; Trollfors B

CORPORATE SOURCE: Dept. of Pediatrics, Medical Academy of Warsaw, Poland.

SOURCE: INFECTION, (1995 Jul-Aug) 23 (4) 212-5. Journal code: 0365307. ISSN: 0300-8126.

PUB. COUNTRY: GERMANY: Germany, Federal Republic of DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199601

ENTRY DATE: Entered STN: 19960219

Last Updated on STN: 20030222 Entered Medline: 19960125

AB In Poland vaccination against diphtheria, tetanus and pertussis (DTP) is recommended from 2-3 months of age. Three doses at approximately 6-week intervals are given. A booster dose of DTP is given at 19-24 months and boosters of DT at 6 and 14 years. In this study serum samples were obtained from 166 Polish children aged 2 weeks to 14 years. Vaccination status was verified from the children's Health Books. Antibodies were determined against pertussis toxin,

filamentous hemagglutinin (FHA),

pertactin, tetanus toxoid and diphtheria

toxin. Antibodies of maternal original against all five antigens were detected in almost all sera from infants not yet vaccinated. Antibody levels increased with the number of vaccinations given. Children who had recently received the fourth vaccination had the highest antibody levels. Antibody levels decreased with time after the fourth vaccination for all antibodies except FHA. It was concluded that the Polish whole cell pertussis vaccine stimulates antibodies against

pertussis toxin, FHA and pertactin, but that

antibodies against FHA probably also are stimulated by cross-reacting antigens. Diphtheria toxin and tetanus

toxoid antibodies were above protective levels in all vaccinated children, but the long-term decreases justify the booster dose at 14 years.

Twenty-five of 166 children (15%) had a vaccination status which deviated from recommendations demonstrating a need to increase the vaccination

L27 ANSWER 19 OF 28 MEDLINE ON STN ACCESSION NUMBER: 93110972 MEDLINE

DOCUMENT NUMBER: 93110972 PubMed ID: 1471424

TITLE: Progress towards the development of new vaccines against

whooping cough.

AUTHOR: Rappuoli R; Podda A; Pizza M; Covacci A; Bartoloni A; de

Magistris M T; Nencioni L

CORPORATE SOURCE: Immunobiology Research Institute, Siena, Italy.

SOURCE: VACCINE, (1992) 10 (14) 1027-32. Ref: 48

Journal code: 8406899. ISSN: 0264-410X.

PUB. COUNTRY:

ENGLAND: United Kingdom

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

199301

ENTRY DATE:

Entered STN: 19930212

Last Updated on STN: 20021218

Entered Medline: 19930128

Acellular vaccines against whooping cough are in the final stage of AΒ clinical testing and are likely to become available for mass immunization in the near future. Over a dozen vaccines of similar composition have been developed by vaccine companies and research laboratories; all of them contain a detoxified form of pertussis toxin (PT) that may be present alone or combined with one or more other non-toxic proteins, such as filamentous haemagglutinin (FHA), pertactin (69 kDa), and the agglutinogens (AGG). Most of the vaccines contain a PT that has been inactivated by chemical treatment, a process that reduces the immunogenicity of the molecule and may not completely eliminate the risk of reversion to toxicity. To avoid these problems, we have constructed by genetic manipulation a mutant of Bordetella pertussis that produces a non-toxic form of PT. This molecule (PT-9K/129G) contains two amino acid substitutions in the S1 subunit (Arg9-->Lys and Glu129-->Gly) which abolish the enzymatic activity of the S1 subunit and all the toxic properties of PT, without changing the immunological properties of the wild-type toxin. Following extensive preclinical studies, which have shown that PT-9K/129G is safe and more antigenic than the toxin treated with chemical agents, this molecule was tested for safety and immunogenicity in adult volunteers, 18-month-old children and 2-month-old infants. The molecule has been tested alone, combined with FHA and pertactin and also combined with diphtheria and tetanus toxoids. (ABSTRACT TRUNCATED AT 250 WORDS)

L27 ANSWER 20 OF 28 MEDLINE on STN ACCESSION NUMBER: 93056720 MEDLINE

DOCUMENT NUMBER:

93056720 PubMed ID: 1431261

TITLE:

Controlled study of a new five-component acellular

pertussis vaccine in adults and young

children.

AUTHOR:

Englund J A; Glezen W P; Barreto L

CORPORATE SOURCE:

Department of Microbiology and Immunology, Baylor College

of Medicine, Houston, TX 77030.

SOURCE:

JOURNAL OF INFECTIOUS DISEASES, (1992 Dec) 166 (6) 1436-41.

Journal code: 0413675. ISSN: 0022-1899.

PUB. COUNTRY: DOCUMENT TYPE:

United States (CLINICAL TRIAL)

Journal; Article; (JOURNAL ARTICLE)

(MULTICENTER STUDY)

(RANDOMIZED CONTROLLED TRIAL)

LANGUAGE:

English

FILE SEGMENT:

Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH:

.199212

ENTRY DATE:

Entered STN: 19930122

Last Updated on STN: 19930122 Entered Medline: 19921222

AB A new five-component acellular **pertussis** (AP) vaccine containing. 10 micrograms of **pertussis** toxoid, 5 micrograms of

filamentous hemagglutinin, 5 micrograms of combined agglutinogens 2 and 3, and 3 micrograms of pertactin was evaluated in adults and young children. AP vaccine was compared with saline placebo in 31 adults, and AP vaccine combined with diphtheria and tetanus toxoids (ADTP) was compared with whole cell DTP in 41 children, ages 16-20 months, who had received whole cell DTP during infancy. AP was mildly to moderately reactogenic in adults, with pain noted within 72 h and 5-8 days after immunization. ADTP was less reactogenic than DTP in children, with significantly decreased pain, redness, irritability, and fever and less use of acetaminophen reported. No late reactions were observed in any child. The multicomponent ADTP was immunogenic, with four-fold or greater antibody rises to at least four pertussis antibody assays in all 15 immunized adults. Pertussis-specific antibody responses in children who received ADTP and DTP were similar. The multicomponent ADTP vaccine is currently being studied in a National Institute of Allergy and Infectious Diseases-sponsored efficacy study in Sweden.

L27 ANSWER 21 OF 28 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN

ACCESSION NUMBER:

2003:226469 BIOSIS

DOCUMENT NUMBER:

PREV200300226469

TITLE:

DTPa-HBV-IPV/Hib vaccine (Infanrix hexaTM.

AUTHOR(S):

Curran, Monique P. (1); Goa, Karen L.

CORPORATE SOURCE:

(1) Adis International Limited, 41 Centorian Drive,

Mairangi Bay, Private Bag 65901, Auckland, 10, New Zealand:

demail@adis.co.nz New Zealand

SOURCE:

Drugs, (2003) Vol. 63, No. 7, pp. 673-682. print.

ISSN: 0012-6667.

DOCUMENT TYPE:

General Review

LANGUAGE:

English

L27 ANSWER 22 OF 28 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN

ACCESSION NUMBER: DOCUMENT NUMBER:

2000:39680 BIOSIS PREV20000039680

TITLE:

Local reactions and IgE antibodies to pertussis

toxin after acellular diphtheria-tetanus

-pertussis immunization.

AUTHOR(S):

Edelman, K. (1); Malmstrom, K.; He, Q.; Savolainen, J.;

Terho, E. O.; Mertsola, J.

CORPORATE SOURCE:

(1) Department of Paediatrics, Turku University Hospital,

FIN-20520, Turku Finland

SOURCE:

European Journal of Pediatrics, (Dec., 1999) Vol. 158, No.

12, pp. 989-994.

ISSN: 0340-6199.

DOCUMENT TYPE:

Article English

LANGUAGE: SUMMARY LANGUAGE: English

Local reactions and pertussis toxin specific immunoglobulin E antibodies (PT-IgE) were investigated in healthy children following primary and booster immunization with a combined diphtheria tetanus acellular pertussis vaccine (DTPa) including pertussis toxin, filamentous haemagglutinin and pertactin

. A primary series of DTPa was administered to 150 infants, and 104 of them received a booster dose of DTPa combined with inactivated polio vaccine at 2 years of age. PT-IgE was measured in serum samples from 72 children using a modified nitrocellulose RAST. Primary immunization was associated with low incidence of local reactions (1%-5%). After the booster dose 21% of children had a local reaction gtoreg20 mm. Local reactions after the booster dose tended to be more common in children who

had experienced reaction at primary immunization. PT-IgE was detected in 18% and 86% of children following primary and booster vaccinations, respectively. Allergic and non-allergic children did not differ in PT-IgE responses. After primary immunization, elevated PT-IgE levels were found more often in children with a family history of allergy than in those without known allergy in the family. Children with local reactions had significantly higher pre- and post-booster PT-IgE levels and median post-booster pertactin IgG and diphtheria-IgG levels than children without local reactions. Conclusion: Acellular pertussis immunization induces IgE antibodies to pertussis toxin, especially after booster vaccination. The higher median pre- and post-booster levels of pertussis toxin specific immunoglobulin E and post-booster levels of IgG to pertactin and diphtheria in children with local side-effects reflect a multifactorial immunological mechanism of such reactions.

L27 ANSWER 23 OF 28 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN

ACCESSION NUMBER: 1992:394414 BIOSIS

DOCUMENT NUMBER: BA94:66589

TITLE: DEVELOPMENT OF A NEW VACCINE AGAINST WHOOPING COUGH.

AUTHOR(S): NENCIONI L; PIZZA M; BRUGNOLI M; MANETTI R; POPDA A; VANNI

R; RAPPUOLI R

CORPORATE SOURCE: R.S. VACCINI, SCALVO, SIENA.

SOURCE: ACTA MED ROM, (1991 (1992)) 29 (1-2), 78-83.

CODEN: AMROBA. ISSN: 0001-6098.

FILE SEGMENT: BA; OLD LANGUAGE: English

Detoxified pertussis toxin (PT) is the main component of all AΒ acellular vaccines against whooping cough that have been proposed so far and has been shown to induce protective immunity in children. Most of the vaccines contain a PT that has been inactivated by chemical treatment, a process that reduces the immunogenicity of the molecule and may not completely eliminate the risk of reversion to toxicity. To avoid these problems, we have constructed by genetic manipulation a mutant of Bordetella pertussis that produces a non toxic form of PT. This molecule (PT-9K/129G) contains two aminoacid substitutions in the S1 subunit (Arg9 .fwdarw. Lys and Glu 129 .fwdarw. Gly) which abolish the enzymatic activity of the S1 subunit and all the toxic properties of PT, without changing the immunological properties of the wild type toxin. Following extensive preclinical studies which have shown that PT-9K/129G is safe and more antigenic of the toxic treated with chemical agents, this molecule has been tested for safety and immunogenicity in adult volunteers. Two studies have been performed, first PT-9K/129G has been tested alone, and then in combination with FHA and 69K , two antigens of Bordertella pertussis which are involved in bacterial adhesion. Finally, the same vaccines, either alone or combined with diphtheria and tetanus toxoide, have been tested in children 12- or 2-4 months old which are the target population for these vaccines. So far, all vaccines tested proved to be safe and very immunogenic both in adults and children, indicating that PT-9K/129G is an ideal candidate for a new vaccine against whooping cough.

L27 ANSWER 24 OF 28 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V. on STN

ACCESSION NUMBER: 2003330552 EMBASE

TITLE: Determination of pertactin IgG antibodies for the

diagnosis of pertussis.

AUTHOR: Trollfors B.; Lagergard T.; Gunnarsson E.; Taranger J. CORPORATE SOURCE: B. Trollfors, Department of Pediatrics, Sahlgrenska University Hospital/East, Goteborg University, S-416 85

Goteborg, Sweden. birger.trollfors@vgregion.se

Clinical Microbiology and Infection, (1 Jul 2003) 9/7
(585-589).

Refs: 16
ISSN: 1198-743X CODEN: CMINFM

COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 004 Microbiology

007 Pediatrics and Pediatric Surgery

017 Public Health, Social Medicine and Epidemiology

O26 Immunology, Serology and Transplantation

030 Pharmacology

037 Drug Literature Index

LANGUAGE: English SUMMARY LANGUAGE: English

AB Objective. To compare increases in serum IgG antibody against pertactin with increases in IgG against pertussis toxin and filamentous hemagglutinin (FHA) in

non-vaccinated children, children vaccinated with pertussis toxoid, and adults, all with culture-confirmed pertussis

. Methods. During a double-blind, placebo-controlled, efficacy trial of a monocomponent pertussis toxoid vaccine, acute and convalescent

sera were obtained from study children and family members with suspected

pertussis. In the present study, IgG antibodies against

pertactin, pertussis toxin and FHA (determined

by ELISA) were compared in 207 individuals with culture-verified **pertussis** and paroxysmal cough for .gtoreq.21 days. Results.

Significant increases in geometric mean serum IgG against all antigens occurred in non-vaccinated children, but more children responded against

pertussis toxin and FHA than against pertactin
 (96%, 97%, and 62%, respectively). Of the children who had

pertussis even though they were vaccinated with the pertussis toxoid vaccine, 97% responded to FHA, while responses to pertussis toxin and pertactin were less common (68% and 61%, respectively). In the 20 adults, the proportions of responders to FHA, pertussis toxin and pertactin were 90%, 80% and 55%, respectively. Conclusion.

Determination of IgG against **pertussis** toxin and **FHA** in paired sera in non-vaccinated children with **pertussis** is a more sensitive diagnostic tool than determination of IgG against

pertactin. Pertactin IgG determinations might be of

value as a complement to the other antibody assays in vaccinated children and in adults.

L27 ANSWER 25 OF 28 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V. on STN

ACCESSION NUMBER: 1999287242 EMBASE

TITLE: Parapertussis and pertussis:

Differences and similarities in incidence, clinical course,

and antibody responses.

AUTHOR: Bergfors E.; Trollfors B.; Taranger J.; Lagergard T.; Sundh

V.; Zackrisson G.

CORPORATE SOURCE: Dr. E. Bergfors, Goteborg Pertussis Vaccine Trial, St.

Paulig 6, S-416 60 Goteborg, Sweden

SOURCE: International Journal of Infectious Diseases, (1999) 3/3

(140-146). Refs: 25

ISSN: 1201-9712 CODEN: IJIDF3

COUNTRY: Canada

DOCUMENT TYPE: Journal; Article FILE SEGMENT: 004 Microbiology

007 Pediatrics and Pediatric Surgery 017 Public Health, Social Medicine and Epidemiology 026 Immunology, Serology and Transplantation 037 Drug Literature Index English LANGUAGE: SUMMARY LANGUAGE: English Objectives: To compare the incidence, clinical course, and serologic response to Bordetella antigens in patients with parapertussis and pertussis. Design: Two studies were performed in Sweden during the 1990s, when pertussis vaccines were used only in clinical trials. Study I was a retrospective study of patients with positive Bordetella cultures obtained in clinical routine, and study II involved an active search for patients with Bordetella infections during a placebo-controlled trial of a pertussis toxoid vaccine. Results: Study I includes 58, and study II 23 patients with parapertussis . In study I, the incidence of parapertussis was 0.016 cases per 100 person years in children 0 to 6 years old and 0 in older children and adults. In study II, the incidence rates of parapertussis and pertussis were 0.2 and 16.2 per 100 person years, respectively, in children followed from 3 months to 3 years of age. The median number of days with cough was 21 in parapertussis and 59 in pertussis. The proportions of children with whooping and vomiting were lower in parapertussis than in pertussis . Geometric mean serum filamentous hemagglutinin IgG increased from 6 to 63, and pertactin IgG from 4 to 12 units/mL in parapertussis patients, which was similar to increases in children with pertussis. Conclusions: Disease caused by Bordetella parapertussis is diagnosed less commonly and is milder and of shorter duration than disease caused by Bordetella pertussis. Parapertussis induced serum IgG against filamentous hemagglutinin and pertactin of similar magnitude as does pertussis, and did not induce serum IgG against pertussis toxin.

L27 ANSWER 26 OF 28 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V. on STN

ACCESSION NUMBER: 94330662 EMBASE 1994330662

DOCUMENT NUMBER:

TITLE: [Pertussis: New vaccine, new strategy].

LA COQUELUCHE: NOUVEAUX VACCINS, NOUVELLES STRATEGIES.

Begue P.; Grimprel E. AUTHOR:

CORPORATE SOURCE: Hopital Armand Trousseau, Consultation de Pediatrie,

Pathologique Infectieuse/Tropicale, 26-28, Av. du Docteur

Arnold Netter, 75571 Paris Cedex 12, France

SOURCE:

Medecine et Hygiene, (1994) 52/2044 (2152-2154).

ISSN: 0025-6749 CODEN: MEHGAB

Switzerland COUNTRY:

DOCUMENT TYPE: Journal; (Short Survey) 004 Microbiology FILE SEGMENT:

> 007 Pediatrics and Pediatric Surgery

017 Public Health, Social Medicine and Epidemiology

026 Immunology, Serology and Transplantation

037 Drug Literature Index

LANGUAGE: French

SUMMARY LANGUAGE: French; English

Whooping cough has disappeared in children of those countries that practice mass immunization against pertussis. Nevertheless a resurgence was first observed in the United States, and now in France: some adults previously immunized are infected again by B. pertussis and have contaminated very young susceptible infants. The whole-cell pertussis vaccine was poorly tolerated, while the

new cellular vaccines of different composition (P.T. associated to FHA and/or pertactine and/or agglutinogenes) are immunogenic and have better tolerance. They permit late boosters which are necessary in order to improve immunity in adults. If their efficacy is proven by the field trials in progress, the acellular vaccines will replace the whole-cell vaccine for primary immunization in France. Thus, the poorly immunized countries can generalize the pertussis vaccine, as did Japan with the acellular vaccine in 80's.

L27 ANSWER 27 OF 28 WPIDS COPYRIGHT 2003 THOMSON DERWENT on STN

ACCESSION NUMBER:

2001-281656 [29] WPIDS

DOC. NO. CPI:

C2001-085606

TITLE:

Mucosal vaccine to protect against diphtheria,

pertussis and tetanus, particularly as

booster, contains bacterial antigens and inactivated

39

bacterial toxin adjuvant.

DERWENT CLASS:

B04 D16

INVENTOR(S): PATENT ASSIGNEE(S):

PIZZA, M; RAPPUOLI, R (CHIR-N) CHIRON SPA

COUNTRY COUNT:

22

PATENT INFORMATION:

PATENT	NO	KIND	DATE	WEEK	LA	PG

WO 2001022993 A2 20010405 (200129) * EN 29

RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE

W: CA JP US

EP 1223975 A2 20020724 (200256) EN

R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE

JP 2003510292 W 20030318 (200321)

APPLICATION DETAILS:

PA:	TENT NO K	IND	API	PLICATION	DATE.
WO	2001022993	A2	WO	2000-IB1440	20000928
ΕP	1223975	A2 ⁻	EΡ	2000-962770	20000928
			WO	2000-IB1440	20000928
JΡ	2003510292	W	WO	2000-IB1440	20000928
			JΡ	2001-526202	20000928

FILING DETAILS:

PATEN	T NO	KIND				ENT	
EP 12	23975	A2	Based		WO		022993
JP 20	0351029	92 W	Based	on	WO	2001	022993

PRIORITY APPLN. INFO: GB 1999-23060 19990929

2001-281656 [29] WPIDS

WO 200122993 A UPAB: 20010528 AB

> NOVELTY - Mucosal DTPa vaccine, comprises (i) diphtheria antigen (DAq); (ii) tetanus antigen (TAq); (iii) acellular pertussis antigen (PAq) and (iv) a detoxified form of either cholera toxin (CT) or Escherichia coli heat-labile toxin (LT).

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

- (1) Using a detoxified mutant of cholera toxin or Escherichia coli heat labile toxin for use as a vaccine; and
 - (2) Using a detoxified mutant of cholera toxin or Escherichia coli

heat labile toxin to manufacture an intranasal medicament for booster vaccination against whooping cough, diphtheria and tetanus.

ACTIVITY - Antibacterial.

MECHANISM OF ACTION - Vaccine. Inducing a specific immune response. USE - The vaccine is used particularly as a booster (following priming by intramuscular immunization) to raise an immune response in a patient, especially a child (claimed), against pertussis, diphtheria and tetanus, but also to treat existing infections. The vaccines can be used to treat the diseases after infection.

ADVANTAGE - The toxin component functions as a mucosal adjuvant, resulting in a vaccine that is as effective as conventional alum-adjuvanted parenteral vaccines. Particularly the new vaccine generates a greater cytokine response to all three antigens, compared with intramuscular injections, with immunoglobulin G responses being essentially the same.

Mice were immunized at 0 and 4 weeks with the triple vaccine, on alum, intramuscularly or (ii) with the triple vaccine containing the K63 LT mutant, intranasally and without alum. Two weeks after the second vaccination, the animals were challenged with an aerosol containing Bordetella pertussis W28 (phase I), and the animals examined periodically to determine the number of viable bacteria in the lungs. For both vaccination protocols, the lungs were effectively clear of bacteria 14 days after challenge. An initial intramuscular injection followed by an intranasal booster were equally effective.

Dwg.0/15

L27 ANSWER 28 OF 28 WPIDS COPYRIGHT 2003 THOMSON DERWENT on STN

ACCESSION NUMBER:

1998-286599 [25] WPIDS

DOC. NO. CPI:

C1998-088745

TITLE:

New vaccine composition - comprises adjuvant and low dose

of diphtheria, tetanus and acellular

pertussis antigen(s).

DERWENT CLASS:

B04 D16

INVENTOR(S):

FLORENT, P; STEPHENNE, J; VANDECASSERIE, C

PATENT ASSIGNEE(S): (SMIK) SMITHKLINE BEECHAM BIOLOGICALS

COUNTRY COUNT:

82

PATENT INFORMATION:

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             A1 19980514 (199825) * EN
                                         26
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      SD SE SZ UG ZW
   W: AL AM AT AU AZ BA BB BG BR BY CA CH CN CU CZ DE DK EE ES FI GB GE
      GH HU ID IL IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MD MG MK MN
      MW MX NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT UA UG US UZ
      VN YU ZW
AU 9853196
             Α
                19980529 (199841)
ZA 9709984
             A 19980930 (199844)
                                         26
NO 9902156
             A 19990504 (199933)
EP 941117
             A1 19990915 (199942)
                                    F.N
    R: AT BE CH DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE SI
CZ 9901640
             A3 19991013 (199949)
AU 710475
             B 19990923 (199951)
CN 1236321
             A 19991124 (200014)
BR 9712917
             A 19991207 (200015)
HU 9904287
             A2 20000428 (200030)
NZ 335384
             A 20001027 (200062)
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MX 9904278 A1 20000101 (200115)

JP 2001503422 W 20010313 (200117) 33

KR 2000053092 A 20000825 (200121)

US 2001014331 A1 20010816 (200149)

EP 941117 B1 20020828 (200264) EN

R: AT BE CH DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE SI

EP 1240905 A1 20020918 (200269) EN

R: AT BE CH DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE SI

DE 69715031 E 20021002 (200273)

TW 471971 A 20020111 (200281)

ES 2182131 T3 20030301 (200322)
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APPLICATION DETAILS:

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AU 9853196	A			1998-53196	19971104
ZA 9709984	A		ZΑ	1997-9984	19971106
NO 9902156	A		WO	1997-EP6180	19971104
			NO	1999-2156	19990504
EP 941117	A1		EΡ	1997-950137	19971104
			WO	1997-EP6180	19971104
CZ 9901640	A3		WO	1997-EP6180	19971104
			CZ	1999-1640	19971104
AU 710475	В		ΑU	1998-53196	19971104
CN 1236321	A		CN	1997-199491	19971104
BR 9712917	A			1997-12917	19971104
				1997-EP6180	19971104
HU 9904287	A2			1997-EP6180	19971104
				1999-4287	19971104
NZ 335384	A			1997-335384	19971104
				1997-EP6180	19971104
MX 9904278	A1			1999-4278	19990507
JP 2001503422	W			1997-EP6180	19971104
		•		1998-521070	19971104
KR 2000053092	A			1997-EP6180	19971104
				1999-704016	19990506
US 2001014331				1997-EP6180	19971104
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				2001-827785	20010406
EP 941117	B1			1997-950137	19971104
		_		1997-EP6180	19971104
•	Related	d to		2002-75821	19971104
EP 1240905	Al Div ex		EΡ		19971104
40545004	_ •		EP		19971104
DE 69715031	E		DE		19971104
				1997-950137	19971104
mrs 471071	70			1997-EP6180	19971104
TW 471971	A		_	1997-119712	19971224
ES 2182131	Т3		ĽР	1997-950137	19971104

FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 9853196 EP 941117	A Based on Al Based on	WO 9819702 WO 9819702
CZ 9901640 AU 710475	A3 Based on B Previous Publ	WO 9819702 AU 9853196

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WO 9819702
                 Based on
                                  WO 9819702
              A Based on
BR 9712917
                                  WO 9819702
HU 9904287
              A2 Based on
                                  WO 9819702
NZ 335384
              A Based on
                                  WO 9819702
JP 2001503422 W Based on
                                  WO 9819702
KR 2000053092 A Based on
                                  WO 9819702
EP 941117
              B1 Based on
                                  EP 941117
EP 1240905
              Al Div ex
                                  EP 941117
DE 69715031
              E Based on
                                  WO 9819702
                 Based on
ES 2182131
              T3 Based on
                                  EP 941117
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PRIORITY APPLN. INFO: GB 1996-23233 19961107

AN 1998-286599 [25] WPIDS

AB WO 9819702 A UPAB: 19980624

Vaccine composition comprises: (a) diphtheria (D), tetanus(T) and acellular pertussis (Pa) antigens; and (b) an adjuvant. The Pa component comprises pertussis toxoid (PT), filamentous haemagglutinin (FHA) and pertactin (69K). The concentrations of the components per 0.5 ml dose of bulk vaccine are: (i) D (not more than 5 Lf (not defined)); (ii) T (not more than 10 Lf); (iii) PT (not more than 10 mu g); (iv) FHA (not more than 10 mu g), and (v) 69K (not more than 4 mu g).

USE - The vaccine may be used against diphtheria, tetanus and pertussis, and it contains a low dose of each of the components D, T, PT, FHA and 69K. The vaccine may be used for administration to infants, adolescents and adults.

ADVANTAGE - The vaccine has the ability to prevent **pertussis** while showing exceptionally low reactogenicity. Dwg.0/14

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	FILE 'REGISTRY' ENTERED AT 15:37:40 ON 03 SEP 2003
•	E ALUMINUM PHOSPHATE/CN
L14	2 SEA ABB=ON "ALUMINUM PHOSPHATE"/CN
	E ALUMINUM HYDROXIDE/CN
L15	1 SEA ABB=ON "ALUMINUM HYDROXIDE"/CN
	FILE 'HCAPLUS' ENTERED AT 15:38:37 ON 03 SEP 2003
L16	18 SEA ABB=ON ?DIPHTHERIA? AND ?PERTUSSIS? AND ?TETANUS? AND
	(FHA? OR ?FILAMENT?(W)?HEMAGGLUT?) AND (?PERTACTIN? OR 69K)
	D AU 1-18
	O SEA ABB=ON L16 AND ?HEPATITIS? (W) ?SURFACE? (W) ?ANTIGEN?
L18	7 SEA ABB=ON L16 AND ?HEPATITIS?
L19	
L20	3 SEA ABB=ON L16 AND ?IMMUN?(3A)(HIB? OR ?POLIO? OR ?HEPATITIS?(
- 01	W) A)
L21	4 SEA ABB=ON L16 AND (L14 OR ?ALUMINUM? (W) ?PHOSPHAT? OR L15 OR
L22	18 SEA ABB=ON L16 OR L18 OR L19 OR L20 OR L21 18 cité from CA Plus — se There mus only 18, 2 provide d'all of them nother than further limiting one for the FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, JICST-EPLUS, JAPIO' ENTERED AT OTTER d'attale
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L23	189 SEA ABB=ON L22
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	20 SEA ABB=ON L24 AND (?ADOLESC? OR ?ADULT?)
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L27	28 SEA ABB=ON L25 OR L26
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